

State of Michigan

1999 Edition

UD-10 Traffic Crash Report Instruction Manual

Produced and distributed by

Michigan Department of State Police

Central Records Division

7150 Harris Drive

Lansing, MI 48913

Phone (517) 322-1150

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1999 Edition, UD-10 Traffic Crash Report Instruction Manual

Estimated Total Cost = \$3,073.24 (\$ 2.04 per copy)

PLEASE MAKE COPIES, AND DISTRIBUTE AS NEEDED

1999 Edition UD-10 Traffic Crash Report

Enhancements Additions & Revisions

Produced and distributed by

**Michigan Department of State Police
Central Records Division
Traffic Safety Data Unit
7150 Harris Drive
Lansing, MI 48913**



PLEASE MAKE COPIES, AND DISTRIBUTE AS NEEDED

Revised: June 1999

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UD-10 FORM COLOR CHANGED

The revised UD-10 form is printed in a new color, making it easier to read and also provide, a better Xeroxed copy.

AREAS OF REPORT EASIER TO IDENTIFY

Outlining and **bold** text have been added to assist in identifying the various data areas of the report form.

NUMBERS INSERTED IN BUBBLES

Numbers have been inserted inside bubbles where text information is included.

TRUCK/BUS INFORMATION BETTER IDENTIFIED

The Truck/Bus Information area on the back of the form, and the Unit Number bubbles in that area, are now better identified.

ENHANCEMENTS Continued

INFORMATION, QUESTIONS & ANSWERS INCORPORATED

Information from UD-10 Advisories, and answers to questions received from field officers regarding the proper completion of the UD-10 report, have been incorporated into the manual instructions.

UD-10 MANUAL INDEX

The UD-10 manual index has been updated and moved to the back of the manual.

CODE IDENTIFICATION SHEET

The code identification sheet has been updated with the additional data code numbers.

ENHANCEMENTS Continued

INFORMATION, QUESTIONS & ANSWERS INCORPORATED

Information from UD-10 Advisories, and answers to questions received from field officers regarding the proper completion of the UD-10 report, have been incorporated into the manual instructions.

UD-10 MANUAL INDEX

The UD-10 manual index has been updated and moved to the back of the manual.

CODE IDENTIFICATION SHEET

The code identification sheet has been updated with the additional data code numbers.

TRAFFICWAY: New data for the UD-10

Sect. 27

➤ *Located on the front side of the UD-10, just below the Location information area.*

A code indicating whether or not a trafficway is divided and whether it serves one-way or two-way traffic. Used in classifying crashes as well as identifying the environment of a particular crash. Important to guide future trafficway design and traffic control.

Indicate the degree of trafficway division at the site of the crash.

- 01 Not physically divided (2way trafficway)
- 02 Divided highway, median strip, **without** traffic barrier
- 03 Divided highway, median strip, **with** traffic barrier
- 04 One-way trafficway

ACCESS CONTROL: New data for the UD-10

Sect. 28

➤ *Located on the front side of the UD-10, just below the Location information area.*

The degree that access to abutting land, light, air, or view in connection with a highway is fully or partially controlled by public authority. Highly correlated with crash rates. Important to guide future highway design and traffic control.

Indicate the degree access to an adjoining roadway is controlled by public authority.

- 01 No access control (unlimited access)
- 02 Full access control (ramp entry & exit only)
- 03 Other (partial access control)

Note: Access is controlled by roadway configuration, not Traffic Control Devices, i.e., No Left Turn signs, etc.

DRIVER CONDITION: New data for the UD-10

Sect. 29

➤ *Located on the front and reverse sides of the UD-10, just below the Driver information area.*

The condition of the driver which may have contributed to the crash. Important for evaluating the effect that driver fatigue, medications, alcohol, drugs, or other conditions have on the crash.

Indicate the apparent condition of the driver at the time of the crash. **At least one bubble must be marked.**

- | | |
|----------------------|-------------------------|
| 01 Appeared normal | 06 Asleep |
| 02 Had been drinking | 07 Medication |
| 03 Illegal drug use | 08 Distracted |
| 04 Sick | 09 Using cellular phone |
| 05 Fatigue | 99 Unknown |

ALCOHOL/DRUGS/IGNITION INTERLOCK: Previously alcohol information.

Sect. 33

➤ *Located on the front and reverse sides of the UD-10, in the Driver information area.*

Drugs:
Indicate whether, in your opinion, drugs had been involved. Next, indicate the type of test, if any, that was administered. If a test was given, enter the test results on the blank line.

If multiple chemical tests were administered and results obtained, record the test results. **More than one bubble may be marked.** Other tests and results may be described in the Remarks section.

Ignition Interlock:
Indicate **Yes** or **No**, whether an Ignition Interlock device is installed in a vehicle involved in the crash. Michigan Motor Vehicle Code, Sec. 257.622a. Effective October 1, 1999

Note: Ignition Interlock device means an alcohol concentration measuring device that prevents a motor vehicle from being started at any time without first determining through a deep lung sample the operator's breath alcohol level. Michigan Vehicle Code, Sec. 257.625L (6)

ADDITIONS Continued

HAZARDOUS ACTION: New data - Options 15 & 16

Sect. 41

Option 15 - Reckless Driving, and **Option 16 - Careless/Negligent Driving** have been added to the Hazardous Action selections reflecting whether, in the investigating officer's opinion, a person is "at fault" in any way; i.e., did the person's action(s) contribute to the crash? A coded entry shall be made regardless of whether a citation was issued or a physical arrest was made.

ACTION PRIOR: New data - Option **37 Avoiding animal**

Sect. 71

Option 37 - Avoiding animal, has been added to the Driver Action selections that best describes the action of the unit just prior to the first harmful event.

PAGE NUMBER: Previously referred to as Form Number

Sect. 3

Since there is the possibility that more than one UD-10 form will be used to report a traffic crash each form **must** be numbered in sequence. For example, if five vehicles are involved in a crash, three forms must be completed. The first UD-10 form would be numbered page "1 of 3" the second UD-10 form, page "2 of 3" and the third UD-10 form, page "3 of 3." If only one form is used, it shall be numbered page "1 of 1." **Only scannable UD-10 forms should be numbered.**

INCIDENT NUMBER: Previously referred to as Complaint Number

Sect. 4

Enter your agency's incident number.

INCIDENT DISPOSITION: Previously referred to as Complaint Disposition

Sect. 6

This box is used for local investigative purpose. As directed by your departmental supervisor, mark the appropriate status of the crash investigation at the time of submittal.

CRASH DATE: MM/DD/CCYY There **must** be a total of eight digits.

Sect. 8

Enter the date on which the crash occurred in the boxes at the top of this area and mark the appropriate bubbles. If the date is unknown, and cannot be reasonably estimated, use the date the crash was discovered by the complainant. A valid date is necessary to update records of each involved driver. If a crash report is submitted to Lansing with an incorrect date, the original report must be deleted and a new report submitted. Both the written and bubble information **must** be completed for verification purposes. There **must** be a total of eight digits, **MM/DD/CCYY**. **Mark each area in its entirety.**

REVISIONS Continued

LOCATION: Divided Roadways

Sect. 21

When referencing divided roadways, always bubble the direction of travel of the roadway involved; i.e., Southbound I-75 (S) I-75; Northbound US-23 (N) US-23.

SPEED LIMIT: Allows for recording speed limits up to 75 MPH.

Sect. 26

Indicate the speed limit of the road on which the crash took place and indicate whether or not the speed limit was posted. If the crash took place within an intersection, enter the highest speed limit of the roads involved.

DRIVER: Date Of Birth MM/DD/CCYY There must be a total of eight digits.

Sect. 32

Enter the driver's date of birth: MM/DD/CCYY. There must be a total of eight digits.

VIN: Vertical lines added for entering 17 digits

Sect. 43

Enter the VIN from the vehicle identification plate on the driver's side dashboard, driver's door, or adjacent door post. Do not rely on the registration certificate for this information.

PASSENGER: Date Of Birth MM/DD/CCYY There must be a total of eight digits.

Sect. 58

Enter the passenger's date of birth: MM/DD/CCYY. There must be a total of eight digits.

*** OWNER/WITNESS/UNINJURED PASSENGER:****Sect. 65**

The owner, witness or uninjured passenger information may be placed in this area. **Do not use this area for recording information on injured passengers.**

*** Note:** The order of choice has been changed to list "Owner" first as a reminder of the importance of entering the vehicle owner information.

SERIAL OVERRIDE NUMBER: Previously referred to as Form Override Nbr.**Sect. 70**

The use of an additional form makes it necessary to "override" the preprinted serial number of the additional form(s) you are using. Enter the preprinted serial number of the first form in the "Serial Override Number" box of all additional forms you submit for a particular crash. This will "override" the preprinted serial number in the lower right corner of each form.

HAZARDOUS MATERIAL PLACARD IDENTIFICATION NUMBER:**Sect. 93**Previously referred to as Type of Hazardous Material Placard

If a Hazardous Material Placard is displayed, mark the four-digit identification number that appears in the center of the diamond-shaped placard (or orange panel, whichever is applicable). If more than one placard appears on the panel, list only one.

STATE OF MICHIGAN

Traffic Crash Report

ORI: MI- 1

Crash Date: Month Day Year
Crash Time: Military

Department Name

No. of Units: 10

Crash Type: 11

Special Circumstances: 12

Weather: 14

Light: 15

Special Checks: 16

County: 17

City/Twp: 18

Traffic Control: 19

Construction Zone (if applicable): 20

Activity: 21

Relation to Roadway: 22

Area: 23

Road Condition: 24

Total Lanes: 25

Speed Limit: 26

Road Name: 21

Distance: 27

Intersecting Road: 28

Traffic Way: 29

Access Control: 30

Unit Number: 31

State: 32

Driver License Number: 33

Date of Birth: 34

License Type: 35

Sex: 36

Hazard Action: 37

First Name: 38

Middle: 39

Last: 40

Street Address: 41

Phone Number: 42

City: 43

State: 44

Zip: 45

Driver Condition: 46

Alcohol: 47

Drugs: 48

Vehicle Registration: 49

State: 50

VIN: 51

Vehicle Description (year, make, color): 52

Insurance: 53

Towed To/By: 54

Vehicle Direction: 55

Special Vehicles: 56

Location of Greatest Damage: 57

Vehicle Type: 58

Vehicle Use: 59

Vehicle Defect: 60

Private Trailer Type: 61

First Name: 62

Middle: 63

Last: 64

Street Address: 65

Phone Number: 66

City: 67

State: 68

Zip: 69

Date of Birth: 70

Sex: 71

Ejected Trapped: 72

Injury: 73

Airbag Deployed: 74

Owner: 75

Witness: 76

Name: 77

Address: 78

Phone Number: 79

Age: 80

Pos: 81

Rest: 82

Person Advised of Damaged Traffic Control: 83

Date: 84

Time: 85

Name: 86

Damaged Property: 87

Public: 88

Owner & Phone: 89

Do Not Write or Mark In This Area: 90

UD-10 SERIAL NUMBER: 91

Serial Override Number: 92

Unit Number 1 2 3 4 5 6 7 8 9	State	Driver License Number										Date of Birth Month Day Year			License Type O CY C F M R		Sex M F	Hazard Action 0 1 2 3 4 5 6 7 8 9																															
	First Name Middle Last										Position		Restraint		Ambulance/Hospital		Citation Issued 1 Hazardous 2 Other																																
	Street Address										Phone Number		Injury K A B C O		Ejected Trapped Yes Yes		Airbag Deployed 1 Yes 2 No 3 Not Equipped																																
	City State Zip										Driver Condition 1 2 3 4 5 6 7 8 9 99		Airbag Deployed 1 Yes 2 No 3 Not Equipped		Total Occup 0 1 2 3 4 5 6 7 8 9																																		
	Interlock Y Yes N No Alcohol Y Yes N No Test Type: Field PBT Breath Blood Urine Test Results Drugs Y Yes N No Test Type: Blood Urine Test Results										Vehicle Registration State VIN										Vehicle Description (year, make, color)																												
Insurance										Towed To/By										Vehicle Direction North East South West										Special Vehicles 1 2 3 4 5 6																			
Location of Greatest Damage 0 1 2 3 4 5 6 7 8 9 10 11 12										Vehicle Type PA CY OR VA MO Other PU GC Truck/Bus ST SM (Complete Truck/Bus Section)										Vehicle Use 1 2 3 4 5 6 7 8 9 10 11										Vehicle Defect 1 2 3 4 5 6										Private Trailer Type 1 2 3 4 5 6 7									
First Impact										Extent of Vehicle Damage 0 1 2 3 4 5 6 7										Driveable Yes No										First Name Middle Last										Date of Birth Month Day Year			Sex M F		Ejected Trapped Yes Yes		Injury K B O A C		
City State Zip										City State Zip										Pos. Rest. Ambulance/Hospital										Airbag Deployed 1 Yes 2 No 3 Not Equipped																			
First Name Middle Last										Date of Birth Month Day Year			Sex M F		Ejected Trapped Yes Yes		Injury K B O A C																																
Street Address										Phone Number			Pos. Rest. Ambulance/Hospital		Airbag Deployed 1 Yes 2 No 3 Not Equipped																																		
City State Zip										Phone Number			Age Pos. Rest.																																				
Owner Witness Name Address Phone Number Age Pos. Rest.										Owner Witness Name Address Phone Number Age Pos. Rest.																																							

Unit Reported on Front										Unit Reported Above									
Sequence of Events Action Prior First Second Third Fourth 0 0 0 0 0 0 0 0 0 0 1 1 1 1 1 1 1 1 1 1 2 2 2 2 2 2 2 2 2 2 3 3 3 3 3 3 3 3 3 3 4 4 4 4 4 4 4 4 4 4 5 5 5 5 5 5 5 5 5 5 6 6 6 6 6 6 6 6 6 6 7 7 7 7 7 7 7 7 7 7 8 8 8 8 8 8 8 8 8 8 9 9 9 9 9 9 9 9 9 9 Most Harmful: (M) (M) (M) (M)										Sequence of Events Action Prior First Second Third Fourth 0 0 0 0 0 0 0 0 0 0 1 1 1 1 1 1 1 1 1 1 2 2 2 2 2 2 2 2 2 2 3 3 3 3 3 3 3 3 3 3 4 4 4 4 4 4 4 4 4 4 5 5 5 5 5 5 5 5 5 5 6 6 6 6 6 6 6 6 6 6 7 7 7 7 7 7 7 7 7 7 8 8 8 8 8 8 8 8 8 8 9 9 9 9 9 9 9 9 9 9 Most Harmful: (M) (M) (M) (M)									

Unit No. 1 2 3 4 5 6 7 8 9 78									
Carrier Name 79									
Address 80									
City State Zip									
Carrier Source Papers Log Book 81 Vehicle Driver ICCMC 82 USDOT 83 MPSC Intra (MI Only) 83									
GVWR 84 Driver's CDL Type A H 28 35 B N 30 P 30 T None X Medical 85 CDL Exempt 86 CDL 88									
Vehicle Type AA BB AH BH AN BN AP BP AT BX AX CH AY CP AZ CX AL Other									
Type & Axles Per Unit First Second Third Fourth Cargo Body Type 91 92 93 94									
UD-10 SERIAL NUMBER Investigated at 74 Reported Date/Time 75									
Photos By 76 Investigator Name(s) & Badge # (Print Only) 77									

Crash Diagram and Remarks									
North									
73									

STATE OF MICHIGAN TRAFFIC CRASH REPORT

Revised 11/98

Crash Type (First Impact)

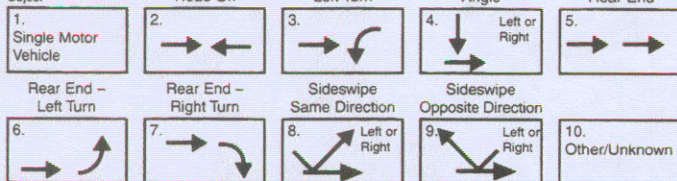
Single Motor Vehicle
includes Car/Pedestrian,
Car/Bicyclist, Car/Animal,
Car/Train, Car/Fixed
Object

Head On

Head On -
Left Turn

Angle

Rear End



Special Vehicles

- | | |
|----------|---------------------------------------|
| 1 Police | 4 Ambulance |
| 2 Fire | 5 Farm equipment |
| 3 Bus | 6 Construction/
maintenance equip. |

Vehicle Defects

- | | |
|-------------------------|----------------|
| 1 Brakes | 4 Tires/wheels |
| 2 Lights/
reflectors | 5 Windows |
| 3 Steering | 6 Other |

Vehicle Use

- 1 Private
- 2 Commercial
- 3 In pursuit/on emergency
- 4 Farm
- 5 School/education
- 6 Club/church (all Y-plates)
- 7 Military
- 8 Other government
- 9 Utility (gas, cable, etc.)
- 10 Road construction/
road maintenance
- 11 Other

Area

Freeway

- 01 Entrance/exit ramp related
- 02 Median crossing related
- 03 Transition area*
- 04 Rest area related
- 05 Scale/weight station related
- 06 All other freeway areas

Intersection

- 07 Within intersection
- 08 Driveway related (within 150 feet
of intersection)
- 09 Intersection related-other

Other Non-Freeway Areas

- 10 Straight roadway
Not related to other selections
- 11 Curved roadway
Not related to other selections
- 12 Driveway related
- 13 Parking related (legal roadside)
- 14 Transition area*
- 15 Median crossing related
- 16 Rail crossing related
- 17 Rest area related
- 18 Scale/weight station related
- 19 Non-traffic area
- 20 Other
- 21 Unknown

*Increase decrease in the number of travel lanes.

Position

- B Bicyclist
P Pedestrian
E Engineer (railroad/train)

1-9 Vehicle Interior
See Representation Below



- 10 Sleeper section
- 11 Other enclosed passenger
area/cargo area
- 12 Other unenclosed passenger
area/cargo area
- 13 Riding in/on trailing unit
- 14 Riding on vehicle exterior
- 15 Unknown

Motorcycles, snowmobiles, etc. (In-line seating)

- 1 Driver
- 4 Passenger one
- 7 Passenger two

Restraint Use

- 01 No belts available
- 02 Shoulder belt only used
- 03 Lap belt only used
- 04 Shoulder & lap belt used
- 05 No belt used
- 06 Child restraint used
- 07 Child restraint not used,
not available or improper
- 08 Restraint failure
- 09 Restraint use unknown
- 10 Helmet worn
- 11 Helmet not worn
- 12 Helmet use unknown

Code of Injury

- K-Fatal Injury** Any injury
which results in death.
- A-Incapacitating Injury**
Any injury other than fatal which
prevents normal activities and
generally requires hospitalization.
- B-Non-Incapacitating Injury**
Any injury not incapacitating but
evident to others at the scene.
- C-Possible Injury** No visible
injury but complaint of pain or
momentary unconsciousness.
- O-No Injury** No indication of
injury.

Action Prior To Crash

Driver Action

- 01 Going straight ahead
- 02 Turning left
- 03 Turning right
- 04 Stopped on roadway
- 05 Involved in prior crash at
same location
- 06 Changing lanes
- 07 Backing
- 08 Slowing/stopping on roadway
- 09 Slowing/stopping other area
- 10 Starting up on roadway
- 11 Starting up other area
- 12 Entering parking
- 13 Leaving parking
- 14 Entering roadway
- 15 Leaving roadway
- 16 Making U-turn
- 17 Overtaking or passing
- 18 Avoiding object
- 19 Avoiding pedestrian
- 20 Avoiding vehicle (front/back)
- 21 Avoiding vehicle (angle)
- 22 Driverless moving
- 23 Parked
- 37 Avoiding animal

Pedestrian Action

- 24 Crossing at intersection
- 25 Crossing not at intersection
- 26 Getting on/off vehicle
- 27 In roadway with traffic
- 28 In roadway against traffic
- 29 Standing/lying in roadway
- 30 Pushing/working on vehicle
- 31 Other working in roadway
- 32 Playing in roadway
- 33 In roadway other reason
- 34 Not in roadway
- 35 Other
- 36 Unknown

Private Trailer Type

- 1 Utility
- 2 Travel trailer
- 3 Boat trailer
- 4 Farm equipment
- 5 Towed auto
- 6 Recreation double
- 7 Other

Sequence of Events/ Most Harmful Event

Non-Collision

- 01 Loss of control
- 02 Cross centerline/median
- 03 Ran off roadway-left
- 04 Ran off roadway-right
- 05 Re-enter roadway
- 06 Overturn
- 07 Separation of units
- 08 Fire/explosion
- 09 Immersion
- 10 Jackknife
- 11 Downhill runaway
- 12 Cargo loss/shift
- 13 Individual fell from vehicle
- 14 Other noncollision

Had a Collision With

Non-Fixed Objects

- 15 Pedestrian
- 16 Bicyclist
- 17 Motor vehicle in transport*
- 18 Parked motor vehicle
- 19 Engineer (railroad/train)
- 20 Animal
- 21 Other non-fixed object

Fixed Objects

- 22 Bridge/pier/abutment
- 23 Bridge parapet end
- 24 Bridge rail
- 25 Guardrail face
- 26 Guardrail end
- 27 Median barrier
- 28 Highway traffic sign post
- 29 Highway signal post
- 30 Luminaire/light support
- 31 Utility pole
- 32 Other pole
- 33 Culvert
- 34 Curb
- 35 Ditch
- 36 Embankment
- 37 Fence
- 38 Mailbox
- 39 Tree
- 40 Railroad crossing signal
- 41 Building
- 42 Traffic island
- 43 Fire hydrant
- 44 Impact attenuator
- 45 Other fixed object

*In transport means a motor vehicle
in motion or on a roadway.

Trafficway

- 01 Not physically divided
(2-way Trafficway)
- 02 Divided highway, median strip,
without traffic barrier
- 03 Divided highway, median strip,
with traffic barrier
- 04 One-way Trafficway

Access Control

- 01 No access control (unlimited access)
- 02 Full access control (ramp entry & exit only)
- 03 Other (partial access control)

Hazardous Action

- 00 None
- 01 Speed too fast
- 02 Speed too slow
- 03 Failed to yield
- 04 Disregard traffic control
- 05 Drove wrong way
- 06 Drove left of center
- 07 Improper passing
- 08 Improper lane use
- 09 Improper turn
- 10 Improper/no signal
- 11 Improper backing
- 12 Unable to stop in assured
clear distance
- 13 Other
- 14 Unknown
- 15 Reckless Driving
- 16 Careless/Negligent Driving

Driver Condition

- 01 Appeared normal
- 02 Had been drinking
- 03 Illegal drug use
- 04 Sick
- 05 Fatigue
- 06 Asleep
- 07 Medication
- 08 Driver Distracted
- 09 Driver Using Cellular Phone
- 99 Unknown

Unit Type

- MV Motor Vehicle
B Bicyclists (all pedalcyclists)
P Pedestrian
E Engineer (railroad/train)

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FOREWORD

This manual was revised in January 1999 by a multi-agency Revisions Committee which thoroughly reviewed each UD-10 data field and offered suggestions for improvement. The 1999 UD-10 form is similar to the 1994 form except for minor enhancements that should help investigating officers more accurately complete the form. These enhancements do not necessitate any additional training. Requested data and form layout will remain the same. However, data labels have been improved for easier understanding.

The data produced from the 410,000 plus traffic crash reports processed each year can be no better than the accuracy of the original reports submitted by Michigan's 660 plus law enforcement agencies. If the law enforcement officer completing the UD-10 Traffic Crash Report does an incomplete job of filling out the form (marking the wrong "bubbles" on the form, making stray marks that confuse the optical scanning device, failing to record Override numbers of additional or follow-up forms, etc.), the resulting data will be of poor quality. Engineers will be unable to identify and make improvements to dangerous intersections and stretches of roadway, traffic safety experts will be unable to evaluate public education campaigns, and dangerous drivers will continue to pose a threat to all motorists because we cannot correctly assign a traffic crash to their driving record.

The State of Michigan no longer has sufficient personnel to correct errors that occur on incomplete Traffic Crash Reports. We rely upon the law enforcement officer for accuracy. **The law enforcement officer is absolutely the most important element of the UD-10!**

To improve the quality of Traffic Crash Reports, be mindful of these common errors:

- **MISSING DATA AND/OR UNIT NUMBER** - It is not enough to simply write in the date; bubbles must also be filled. Also, the UNIT number bubble must be filled in correctly.
- **BOTH "CORRECTED" AND "REPLACE" BUBBLES ARE MARKED** - It cannot be both, it must be one or the other. Also, when submitting a form to CORRECT, REPLACE or DELETE, the OVERRIDE box must have the number of the original form.
- **MISSING OVERRIDE NUMBER** (in the lower right corner) - If the officer is submitting a form other than the original, or is using a supplemental form because more than two units were involved, the original serial number must be written in the OVERRIDE box. This links the subsequent information with the original form.
- **STRAY MARKS** cause the form to be rejected. The officer must not make ANY STRAY marks, including personal initials in a corner to indicate it has been reviewed by a supervisor, slashes through areas that do not apply, signatures that extend outside the box, drawing in the margins, etc. A stray mark will cause the report to be rejected by the computer.

**If you have questions about the UD-10, call the
Traffic Safety Data Unit (517) 322-1104 or 322-6910**

WE WELCOME YOUR COMMENTS AND SUGGESTIONS

This 1999 version of the *UD-10 Instruction Manual* is the result of many months of "fine tuning" by the Revisions Committee. Every reasonable effort was made to resolve problems and questions faced by Michigan's law enforcement community when completing the UD-10. However, the committee knows it is impossible to thoroughly discuss and resolve every conceivable circumstance that occurs at traffic crashes and welcomes your comments and suggestions. Please submit suggestions you may have, in writing to the Central Records Division. **This manual replaces any previous edition.**

SPECIAL THANKS

The Central Records Division acknowledges and greatly appreciates the many hours of work by members of the Revisions Committee and their respective agencies:

AAA of Michigan
Detroit Police Department
Holland Police Department
Ionia County Sheriff Department
Kalamazoo County Sheriff Department
Michigan Department of State Police, Brighton Post
Michigan Department of State Police, Criminal Justice Data Center
Michigan Department of State Police, Ionia Post
Michigan Department of State Police, Motor Carrier Division
Michigan Department of State Police, Office of Highway Safety Planning
Michigan Department of State Police, Traffic Services Section
Michigan Department of State, Bureau of Driver Improvement
Michigan Department of Transportation, Traffic & Safety Division
Region 2 Planning Commission (Jackson)
Traffic Improvement Association of Oakland County
University of Michigan Transportation Research Institute
VanBuren County Road Commission
Wayne County Health Department

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Concept of the State of Michigan TRAFFIC CRASH REPORT

This manual has been prepared to provide guidance for completion of the State of Michigan Traffic Crash Report form (UD-10) prescribed by the Director of the Department of State Police pursuant to Section 257.622 of the Compiled Laws of 1970, as amended.

Michigan law requires that crash reports be forwarded to the Director of the Department of State Police on forms prescribed by that office. Such reports are not available for use in any court action, but are used for the purpose of furnishing statistical information on crashes. They also provide the basis for traffic legislation, enforcement, engineering, education, driver licensing, and public information generally not available from any other source, pursuant to Section 257.624 of the Compiled Laws of 1970, as amended.

Every reasonable effort **shall** be made to obtain factual information for the completion of the report. If this is not possible, officers **shall** use their best judgment and record their considered opinions based on their investigation and experience. This should be done even though it may not be possible to substantiate all recorded information or have sufficient evidence to initiate prosecution.

When prosecution is initiated, "a police officer may issue a citation to a person who is a driver of a motor vehicle involved in a crash, when, based upon PERSONAL INVESTIGATION, the officer has reasonable cause to believe that the person has committed a misdemeanor under the act" or "is responsible for a civil infraction in connection with the crash." MCL 257.728(8) and 257.742(2).

Each crash report is a display of your ability as a professional traffic crash investigator. Compliance with instructions in the manual will help assure that reports are filled out completely, accurately, uniformly, and will be of greatest possible value for crash prevention purposes.

* * * * *

INSTRUCTIONS FOR COMPLETION

APPLICATION

The UD-10 Traffic Crash Report will be used to report to the State of Michigan, all traffic related motor vehicle crashes. Also, any crash involving a snowmobile or off-road vehicle (ORV), whether traffic or non-traffic related.

FORM DESIGN

The UD-10 is a two-sided form designed to record the information pertaining to one unit (vehicle, driver, and passengers) on the front side of the form, and that of a second unit on the back. All "bubbled" entries and shaded areas will be entered into the State of Michigan Traffic Crash Records System.

FATAL CRASHES

In crashes involving fatalities, the State of Michigan requires that all passengers, injured and uninjured be listed on the crash report and that the "Crash Diagram and Remarks" area be completed with a complete description of the crash. Include all supplemental reports relating to this crash. All fatalities occurring on non-public highways (driveways, shopping centers, etc.) shall also be submitted. All fatalities must be reported to MSP Operations via the Law Enforcement Information Network (LEIN), using the format shown in Appendix B, page 69.

PARKED VEHICLES

Legally Parked Vehicle - A legally parked vehicle is considered a traffic unit. All occupants of legally parked vehicles are considered passengers. Do not include a driver license number of an occupant seated behind the wheel in a legally parked vehicle.

Illegally Parked Vehicle - An illegally parked vehicle is considered a motor vehicle in transport and should include all driver, passenger, and vehicle information.

SCANNED FORMS

The UD-10 form is designed so that "bubbled" information can be automatically recorded by an optical scanning device. This scanning picks up filled-in circles or "bubbles." **It does not scan handwriting.**

Here are some important points to keep in mind when using this form:

1. You may use a No. 2 pencil or a pen (blue or black ink only) to complete this form. **Do not use a felt tip pen.**
2. Do not write or make any marks on the paper outside the rectangular form.
3. If you make an error in either the "write-in" or "bubble" areas and are using pencil, erase the answer completely. If you are using ink, correction tape or whiteout may be used (correction tape is preferred).
4. Do not use staples.
5. Damaged, ripped, torn, or scotch-taped forms are rejected by the optical scanner. They will be returned and must be re-written.
6. When you record a single digit response in an item that has two columns, you **must** fill in a zero in the first column. For example, if the correct response to an item is "3," fill in a "0" in the first column and a "3" in the second column. The result will be "03."

CORRECT

●	0
1	1
2	2
3	●

INCORRECT

0	0
1	1
2	2
●	3

FOR ASSISTANCE

Direct any questions about the use of the UD-10 Traffic Crash Report form to:

**Michigan State Police
Central Records Division
7150 Harris Drive
Lansing, MI 48913**

**Office Phone
(517) 322-6910
(517) 322-1104**

**Office Fax
(517) 322-5385**

INCIDENT/ENVIRONMENTAL INFORMATION

1. ORI (Originating Agency Number):

ORI:	MI-							
------	-----	--	--	--	--	--	--	--

Each police agency's nine character ORI needs to be entered. The first two characters, "MI," are preprinted on the form. Enter the remaining seven digits. This is a unique identifier for every law enforcement agency. It is important that it be completely filled out.

2. DEPARTMENT NAME:

Department Name

Do not abbreviate the agency name. Enter the full name of the reporting police department or agency. Agency type may be abbreviated, e.g., Police Department (**PD**), Sheriff Department (**SD**), and Michigan State Police (**MSP**).

Michigan State Police **must** identify their non-abbreviated post location. The post number may be listed in addition to the post name.

3. PAGE NUMBER:

Page _____	Of _____	UD-10 (1/99)
------------	----------	--------------

Since there is the possibility that more than one UD-10 form will be used to report a traffic crash each form **must** be numbered in sequence. For example, if five vehicles are involved in a crash, three forms must be completed. The first UD-10 form would be numbered page "1 of 3" the second UD-10 form, page "2 of 3" and the third UD-10 form, page "3 of 3." If only one form is used, it shall be numbered page "1 of 1." **Only scannable UD-10 forms should be numbered.**

4. INCIDENT NUMBER:

Incident #

Enter your agency's incident number.

5. FILE CLASS:

File Class

Enter the appropriate file class for this crash. If your agency does not use file class, you may use this area to record other information.

6. INCIDENT DISPOSITION:

Incident Disposition	
<input type="radio"/> Open	<input type="radio"/> Closed

This box is used for local investigative purpose. As directed by your departmental supervisor, mark the appropriate status of the crash investigation at the time of submittal.

7. REVIEWER:

Reviewer

If your agency has someone review this form at the supervisory level, the person reviewing this report will enter his or her initials or other identifier.

8. CRASH DATE:

Crash Date											
Month			Day			Year					
0	1	2	3	4	5	6	7	8	9	0	1
1	1	1	1	1	1	1	1	1	1	1	1
2	2	2	2	2	2	2	2	2	2	2	2
3	3	3	3	3	3	3	3	3	3	3	3
4	4	4	4	4	4	4	4	4	4	4	4
5	5	5	5	5	5	5	5	5	5	5	5
6	6	6	6	6	6	6	6	6	6	6	6
7	7	7	7	7	7	7	7	7	7	7	7
8	8	8	8	8	8	8	8	8	8	8	8
9	9	9	9	9	9	9	9	9	9	9	9

Enter the date on which the crash occurred in the boxes at the top of this area and mark the appropriate bubbles. If the date is unknown, and cannot be reasonably estimated, use the date the crash was discovered by the complainant. A valid date is necessary to update records of each involved driver. If a crash report is submitted to Lansing with an incorrect date, the original report must be deleted and a new report submitted. Both the written and bubble information must be completed for verification purposes. There **must** be a total of eight digits, **MM/DD/CCYY**. **Mark each area in its entirety.**

9. CRASH TIME:

Crash Time			
Military			
0	0	0	0
1	1	1	1
2	2	2	2
3	3	3	3
4	4	4	4
5	5	5	5
6	6	6	6
7	7	7	7
8	8	8	8
9	9	9	9

Enter the military time at which the crash occurred in the boxes at the top of this area and mark the appropriate bubbles. **All military time must include four digits. Mark each area in its entirety. If time occurred is unknown, code with 9's.**

One minute after midnight is entered 0001 (this is the start of the day). 9:15 AM is 0915, 12:00 noon is 1200. From 1:00 PM on, simply add 12 to the hour to get the military time. For example, 1:00 PM equals 1300 (1:00 + 12:00 = 13:00), 2:25 PM equals 1425 (2:25 + 12:00 = 14:25), and 10:05 PM equals 2205 (10:05 + 12:00 = 22:05).

10. NUMBER OF UNITS:

No. of Units
<input type="radio"/> 1
<input type="radio"/> 2
<input type="radio"/> 3
<input type="radio"/> 4
<input type="radio"/> 5
<input type="radio"/> 6
<input type="radio"/> 7
<input type="radio"/> 8
<input type="radio"/> 9

Enter the total number of units (**motor vehicles, pedestrians, bicycles and railroad/train engineers**) that were physically involved and individually reported in this crash, up to a maximum of nine. Each unit counted in a crash **must** have a separate unit section completed.

Example: A crash involving a car that strikes two pedestrians would be listed as three units.

Example: All of the following would be crashes involving two units:

car-train
car-moped
car-pedestrian
car-snowmobile
car-bicycle
car-farm tractor

Example: A car-animal crash or car-tree crash would involve only one unit because an animal or tree is not a motor vehicle, bicycle, pedestrian or train.

NOTE: Do not include non-contact vehicles in the total number of units. Non-contact units shall be described in the "Remarks" section only. Thus, if one car forces another off the road and into a collision with an off-road object, this would be a one-unit crash. It would be a two-unit crash only if the two cars actually contacted one another. However, if one vehicle sets in motion an object (such as a stone, a piece of metal, loose tire, or other debris) which damages another vehicle, this is a two-unit crash, even though you may have very little or no information about the vehicle which initially set the object in motion. In this case, even though there was not direct contact between the vehicles, an object was set in motion which made contact and caused damage. Further explain such occurrences in the "Remarks" section.

If a crash involves more than nine units, report the first nine together as one crash. Record any additional units as a second crash with the same DATE, TIME and LOCATION. The first form of this second crash **must** be completed in its entirety. Do not enter the UD-10 Serial number from the first crash in the override area of the second crash. Write the UD-10 Serial numbers in the "Crash Remarks" section on the reverse side of each form.

Example: A crash involving ten motor vehicles and one pedestrian would have 11 units. However, for reporting purposes, the units in this crash would be divided into two distinct crashes. Up to nine units could be reported in the first crash, with the remainder being reported in the second crash.

11. CRASH TYPE:

Crash Type	
①	Single Motor Vehicle
②	Head On
③	Head On-Left Turn
④	Angle
⑤	Rear End
⑥	Rear End-Left Turn
⑦	Rear End-Right Turn
⑧	Sideswipe-Same
⑨	Sideswipe-Opposite
⑩	Other/Unknown

From the list, choose one crash type that best identifies the crash. In a multi-impact crash, only the first crash type will be coded.

Determine Crash Type:

"Crash Type" is based on the intended direction of travel, regardless of point(s) of impact or direction vehicles ultimately face after crash. Damage area on the vehicle alone does not determine crash type.

Example: Two motor vehicles are approaching each other, one vehicle loses control and starts to spin. The rear of the out of control vehicle impacts the front of the other vehicle. This would be considered a "Head On" crash because the intended direction of travel of both vehicles was toward each other.

The following definitions will be applied to crash types. Except for "Single Motor Vehicle," the selection will be based on the first impact of the first two motor vehicles involved in the crash.

1. **Single Motor Vehicle:** A single or multiple unit crash which involves only one motor vehicle as defined in this manual.

This includes those cases in which a motor vehicle was (1) the only traffic unit and (2) the only motor vehicle involved collided with a bicyclist, pedestrian, animal, railroad train or any other non-motorized object.

Any motorized (i.e., self-propelled) vehicle or device is considered a "motor vehicle" even though the vehicle or device may not be defined as a motor vehicle in the Michigan Motor Vehicle Code or other applicable legislation. Thus, traffic units such as ORV's, snowmobiles, ATV's, mopeds, farm tractors, garden tractors and motorized wheelchairs are motor vehicles for the purposes of completing this form. (This will be discussed further in Section 31 - Unit Type, page 31.)

(MV) Motor Vehicle

- "Standard" motor vehicles
cars, pickups, vans, buses,
trucks, motorcycles, etc.
- Emergency vehicles
police, fire, ambulance
- Farm equipment
farm tractors, combines, etc.
- Off Road Vehicles (ORV)
- Snowmobiles
- Mopeds
- All-terrain vehicles (ATV)
- Dirt bikes, motorbikes, go-carts
- Garden tractors
- Motorized wheelchairs
- Cushman scooters
- * Road maintenance equipment
dump trucks, snowplows, road
graders
- * Construction equipment
rollers, front-end loaders,
scrapers, mobile cranes, etc.

(P) Pedestrian

- Person on foot
- Person on skis, skates or rollerblades
- Rider of horse
- Horse and buggy (each occupant,
including the driver, will be listed as a
separate pedestrian unit)
- Non-motorized wheel chair

(B) Bicyclist

- All forms of pedalcycles, including
those with one, two, and three wheels

(E) Engineer

- Engineer (railroad/train)

*** Construction equipment and road maintenance vehicles WHILE ACTUALLY ENGAGED IN WORK UPON THE SURFACE OF A HIGHWAY (such as plowing snow) should be listed as Special Mobile Equipment (MCL 257.62) in the remarks section only of the UD-10. Operators can still be cited if they are responsible for a crash.**

Examples of Single Motor Vehicle Crashes:

One motor vehicle and two pedestrians.
One motor vehicle and a railroad train.
One motor vehicle and a bicycle.

2. **Head On:** The intended direction of travel of both vehicles must be toward each other. The direction that the vehicles are facing when they come to rest, or the points of impact on the vehicles, are not the determining factors.
3. **Head On (Left Turn):** When two vehicles are approaching head on and at least one is attempting or has completed a left turn.
4. **Angle:** This will be marked when the intended direction of travel is basically perpendicular for both drivers and there is a side impact of approximately 90 degrees. If the side impact takes place during a "Head On-Left Turn," "Rear End-Left Turn," or "Rear End-Right Turn," do not mark "Angle."
5. **Rear End:** When the vehicles are traveling in the same direction, one behind the other, and no turn is involved. Area of damage on the vehicles is not the determining factor.
6. **Rear End (Left Turn):** When the intention of one driver was to make a left turn and he was struck by a following vehicle not necessarily in the same lane, "Rear End-Left Turn" will be marked. Initial impact damage to the turning vehicle may not necessarily be to the rear end.
7. **Rear End (Right Turn):** Same as #6 except for right turns.

8. **Sideswipe Same:** Vehicles traveling in the same direction making side contact will be marked "Sideswipe Same." If a vehicle spins out of control and makes contact with another vehicle traveling in the same direction "Sideswipe Same" will still be marked regardless of points of contact on the vehicles. ("Sideswipe" differs from "angle" in that a sideswipe is a glancing impact and should not in itself stop the forward movement of the vehicle. An angle crash is a more direct impact and may stop the forward movement of one vehicle.)
9. **Sideswipe Opposite:** This will be marked when vehicles are traveling in opposite directions and they make a glancing side impact. Instructions for #8 also apply to this selection.
10. **Other/Unknown:** This will be marked if you feel the crash does not fit in one of the first nine selections.

Any crash involving any vehicle backing into another **is not** considered a "rear end" crash.

Example: The only motor vehicle involved in a crash runs off the road and overturns. This would be marked as "1. Single Motor Vehicle."

Example: A car striking any of the following, on or adjacent to the roadway, would be marked as "1. Single Motor Vehicle" because none of the objects struck is a motor vehicle:

- . pedestrian
- . bicyclist
- . engineer (railroad/train)

Any crash involving two or more motor vehicles will require you to mark Options 2 through 10, depending upon the profile of the collision.

Example: A car stopped, waiting to make a left turn, is struck in the rear by another car. Option "6. Rear End-Left Turn" shall be marked.

Example: A car proceeding straight through an intersection collides with an oncoming snowmobile that suddenly makes a left turn. Option "3. Head On-Left Turn" shall be marked because of the type of crash and because, for UD-10 traffic crash reporting purposes, the snowmobile is considered a motor vehicle.

Example: A car rear-ends an ATV. Both are headed straight ahead at impact. Code "5. Rear End" shall be marked since the ATV is considered to be a motor vehicle. The same code would be used if, instead of an ATV, some other type of motorized vehicle was struck (e.g.: farm tractor, snowmobile, etc.).

If multiple impacts are involved, only the first impact shall be marked.

Example: A car is sideswiped by an oncoming truck. The car then proceeds into a head-on crash with an oncoming vehicle. Because the first impact involved a sideswipe with an oncoming vehicle, Option "9. Sideswipe-Opposite" shall be marked.

12. SPECIAL CIRCUMSTANCES: (Mark at least one)

Special Circumstances

- ① None
- ② Deer
- ③ School Bus
- ④ Hit and Run
- ⑤ Fleeing Police

Indicate special circumstances which were in any way involved or associated in the crash. **At least one bubble must be marked, and more than one bubble may be marked if circumstances warrant it.** If no special circumstances exist, you must mark "1. None."

None

No special circumstances exist.

Deer

The same reasoning is used in cases involving deer and police pursuits.

Example: A driver swerves to miss a deer, loses control and collides with an oncoming vehicle. This is a deer-associated crash. Mark the "Deer" bubble.

School Bus

Example: "School bus" shall be indicated in situations where a school bus is related to the crash in any way. This includes situations where the school bus was a contact vehicle or where other units crashed due to the presence and influence of a school bus, even though the bus itself wasn't a contact unit.

Example: A school bus is hit by another vehicle. The school bus is actually **involved** in the crash. Mark the "School Bus" bubble.

Example: An automobile that has stopped for a school bus is struck by another vehicle. The school bus was not involved in this crash but was associated with it. Mark the "School Bus" bubble.

Example: A school bus has stopped. While a student is crossing the road, a driver disregards the bus's flashing lights and hits the student. The bus was associated with the incident but not involved. Mark the "School Bus" bubble.

Hit & Run

If the crash was a "hit and run," mark the "Hit and Run" bubble also.

Fleeing Police

If a police pursuit situation causes other vehicles to crash, mark the "Fleeing Police" bubble.

Example: A patrol car collides with a vehicle it is pursuing. Mark the "Fleeing Police" bubble.

Example: A patrol car is in pursuit of a car that disregards a red traffic signal and collides with another car. Mark the "Fleeing Police" bubble.

Example: A patrol car is pursuing Car A. Car A's erratic driving causes two other vehicles to collide, but A is not a contact vehicle in that crash, nor is the patrol car. Mark the "Fleeing Police" bubble.

Example: A vehicle, being pursued by police, collides with a school bus. Mark the "School Bus" and "Fleeing Police" bubbles.

13. SPECIAL STUDY:

Special Study	
① Local	
② State	

The "special study" box allows both state and local officials to highlight specific crash situations for statistical studies. If your department is involved in such a study you will receive instruction on when to mark this box. If you receive no such instructions, leave the bubbles unmarked.

14. WEATHER: (Mark only one)

Weather (Mark Only One)	
① Clear	
② Cloudy	
③ Fog/Smoke	
④ Rain	
⑤ Snow/ Blowing Snow	
⑥ Severe Wind	
⑦ Sleet/Hail	
⑧ Other/Unknown	

Indicate the **one most significant** weather condition at the time of the crash. If there are multiple weather factors, the most significant factor **must** be indicated. (Other factors may be noted in the Crash Diagram and Remarks area.)

15. LIGHT: (Mark only one)

Light (Mark Only One)	
① Daylight	
② Dawn	
③ Dusk	
④ Dark-Lighted	
⑤ Dark-Unlighted	
⑥ Other/Unknown	

Indicate the **one most significant** light condition at the time of the crash. If there are multiple light factors, the most significant factor **must** be indicated. (Other factors may be noted in the Crash Diagram and Remarks area.)

16. SPECIAL CHECKS: (More than one bubble may be marked)

Special Checks	
<input type="checkbox"/>	Fatal (Report All)
<input type="checkbox"/>	Corrected Copy
<input type="checkbox"/>	Replace (Entire Report)
<input type="checkbox"/>	Delete (Entire Report)
<input type="checkbox"/>	Non-Traffic Area
<input type="checkbox"/>	ORV/ Snowmobile

FATAL:

Mark this box when a fatality is known to have occurred as of the date the report is submitted. **If a person dies as a result of a crash** (medical examiner determination) any time after the report has been submitted, a corrected report **must** be submitted. The "Fatal" bubble would be marked on the corrected report. **Be sure to fill in the fatal bubble and the corrected copy bubble, and write the original serial number in the override box.**

SPECIAL CHECKS ADDITIONAL INFORMATION

FATAL:

The fatal bubble should be filled in whenever any person listed on a UD-10 dies. Those deaths are reported to Special Operations via LEIN and should be bubbled with a "K" on the UD-10. Fatales will fall within four categories:

1. **NORMAL Fatalities:** These are deaths that occur within 30 days of a crash as the result of injuries received in that crash. Should the death occur after the UD-10 has been submitted, but within the 30-day time frame, a corrected copy must be forwarded for the death to be counted statistically.
2. **NON-COUNT Fatalities:** Unlike "Normal" Fatales, these deaths are not counted statistically because the person expired more than 30 days after the crash date. Upon submission of the UD-10 (with the appropriate FATAL and "K" bubbles marked), FARS Unit personnel will process the information they require and will then whiteout the FATAL bubble and change the "K" to an "A" injury. The UD-10 will be processed as an injury crash.
3. **MEDICAL Fatalities:** When a person dies from medical causes not related to the crash, the death is not statistically counted as a traffic fatality. Upon receipt of the UD-10 with the FATAL and "K" bubbles marked by the policing agency, FARS Unit personnel will, upon verification by the agency or a death certificate, white-out the FATAL bubble and change the "K" to an "O" injury code before the report is processed.
4. **NON-TRAFFIC Fatalities:** Non-Traffic Fatales are those that occur in or on areas not publicly maintained and/or open to the public for thru traffic; i.e., parking lots, rest areas, fields, lake surfaces, etc. Fatales deemed Non-Traffic are not compiled with the Normal Fatales, but our association with Department of State driver records and Department of Community Health death certificates does benefit from the collection of Non-Traffic fatal reports. With the exception of Non-Traffic Snowmobile and ORV crashes (which are required, by state law, to be submitted and compiled), Non-Traffic fatalities are used simply as a name list for queries and to make sure driver records are cleared; they are not processed for statistics.

CORRECTED COPY: (Change to form already submitted)

Mark "corrected copy" to submit a change to a crash form **already submitted** to the Michigan State Police, Document Processing Unit. The corrected copy requires certain information in addition to the content item(s) you are changing or adding. The following items **must** be on all corrected copies submitted:

- Unit Number must be bubbled
- Agency ORI
- Department name
- Date of crash
- The preprinted serial number of the original traffic crash report you are correcting (See Section 70 - Serial Override Number, page 49)

Do not write over, cross out or white out pre-printed serial number.

When using the correction option you **MUST** code one of the "Unit Number" bubbles on the **FRONT** of the form being used to make the correction. Computer software "triggers" on this bubble to make corrections. No correction to anything will take place if this bubble is not coded. Use the area to correct **any** "unit" information, then fill in the appropriate unit number bubble (1-9), Example: **If you are correcting information about Unit #2 only, use the front area of the form. If you are correcting information that is not in this area you MUST fill in a unit number bubble (1-9).** Any information coded in other areas (front or back) of the form will then be changed. In cases where you wish to correct information not directly related to any particular "unit," fill in the bubble denoting "unit number 1."

You cannot delete specific entries via the corrected copy process. You must use the **replace** process to do that.

REPLACE: (Replace entire report)

If you are changing the number of units, or the identity of a driver or passenger, you **must** submit an entire report.

If you wish to re-submit an entire report and replace it with an updated report, mark the "Replace" bubble. You **must** have a completely rewritten report. This new report will supersede the initial report submitted. This situation occurs when investigation of a crash reveals a major change in the circumstances known to have occurred in that crash.

Your completely rewritten report **must** include the preprinted serial number of the traffic crash report you are replacing (See Section 70, page 49). **The entire report must be replaced. You cannot replace a single page of a report.**

Example: Investigation reveals the identity of a driver in a crash initially reported as "Hit-Run."

Example: Your investigation reveals the number of units you reported on a previously submitted crash report was inaccurate. To correct the number of units, you must now **replace the original UD-10** crash report.

Example: In a previously submitted report, John Jones was listed as the driver of a vehicle. Later, he is determined to have been a passenger instead. This change will require you to **replace the original UD-10** crash report because you are not just changing driver information, you are trying to delete it altogether.

DELETE: (Delete entire report from system)

Mark this bubble only when you wish to delete an **entire** report from the system.

The report form you submit to delete an entire previously submitted traffic crash report **must** have the following information:

- Agency ORI
- Department name
- Date of crash previously reported
- Preprinted serial number of the previously submitted traffic crash report you wish deleted (See Section 70, page 49)
- Unit #1 bubble filled in

Example: A previously submitted "Hit-Run" crash is determined to be a false police report.

Example: A traffic crash proves to be the result of an intentional act; i.e., an assault.

NON-TRAFFIC:

Non-traffic crashes will not be submitted to the State records system except for the following situations:

1. Non-traffic snowmobile crashes
2. Non-traffic Off Road Vehicle (ORV) crashes
3. Fatal non-traffic crashes

The State of Michigan requires that both traffic crashes and non-traffic crashes involving snowmobiles and ORV's be reported. This requirement applies whenever an ORV or snowmobile is involved in a crash resulting in a fatality, personal injury, or property damage estimated at **\$100 or more**.

While there is no state law requiring the reporting of non-traffic crashes other than snowmobiles and ORV's, the State of Michigan requests that fatal non-traffic crashes be reported via the UD-10 Traffic Crash Report and the LEIN Fatal Crash Notification shown in Appendix B, page 69.

More than one bubble may be marked in "Special Checks."

Example: A fatal crash occurs in a shopping center parking lot. The "Fatal" and "Non-Traffic" bubbles **must** be marked.

Example: A snowmobile fatally injures a pedestrian in an off-road collision on private property. The "Fatal," "Non-Traffic" and "ORV/Snowmobile" bubbles **must** be marked.

17. COUNTY:

County	
<input type="text"/>	<input type="text"/>
<input type="text" value="0"/>	<input type="text" value="0"/>
<input type="text" value="1"/>	<input type="text" value="1"/>
<input type="text" value="2"/>	<input type="text" value="2"/>
<input type="text" value="3"/>	<input type="text" value="3"/>
<input type="text" value="4"/>	<input type="text" value="4"/>
<input type="text" value="5"/>	<input type="text" value="5"/>
<input type="text" value="6"/>	<input type="text" value="6"/>
<input type="text" value="7"/>	<input type="text" value="7"/>
<input type="text" value="8"/>	<input type="text" value="8"/>
<input type="text" value="9"/>	<input type="text" value="9"/>

Enter the county number in which the crash occurred and fill in the bubbles. **This is a required field, if not completed properly, the form cannot be processed.**

18. CITY/TWP:

City/Twp	
<input type="text"/>	<input type="text"/>
<input type="text" value="0"/>	<input type="text" value="0"/>
<input type="text" value="1"/>	<input type="text" value="1"/>
<input type="text" value="2"/>	<input type="text" value="2"/>
<input type="text" value="3"/>	<input type="text" value="3"/>
<input type="text" value="4"/>	<input type="text" value="4"/>
<input type="text" value="5"/>	<input type="text" value="5"/>
<input type="text" value="6"/>	<input type="text" value="6"/>
<input type="text" value="7"/>	<input type="text" value="7"/>
<input type="text" value="8"/>	<input type="text" value="8"/>
<input type="text" value="9"/>	<input type="text" value="9"/>

Enter the City or Township number for the political jurisdiction in which the crash occurred. Using the City/Twp code list, fill in the appropriate bubbles. **This is a required field, if not completed properly, the form cannot be processed.**

19. TRAFFIC CONTROL:

Traffic Control

- ① Signal
- ② Stop Sign
- ③ Yield Sign
- ④ None of These

A traffic signal is a 3-light (red-yellow-green) device that alternately assigns right-of-way. Even if the light is in a red-yellow flashing pattern, it is still considered a traffic signal. Mark Item 1 (Signal), regardless of whether or not the traffic signal was operating properly at the time of the crash.

A 1-light beacon that flashes red or yellow is not considered a traffic signal. This 1-light beacon would be accompanied by a stop or yield sign. Indicate which type of sign is present.

If the crash occurred within 150' of an intersection, mark which of the traffic control devices was present at the intersection.

If no Traffic Control was present, mark Item 4 (None of These).

20. CONSTRUCTION ZONE: (If applicable)

Construction Zone (if applicable) (Mark One From Each Group)

Type	Lane Closed	Activity
① Const./Maint.	① Yes	① On Road
② Utility	② No	② Off Road
		③ None

If the crash took place within a construction zone, indicate the specific type of area by marking one choice in each of the three categories. If no construction zone is present, do not complete this box.

TYPE

"Construction/Maintenance" Indicates roadway construction or repair. The building or repair of the road itself, and roadway-related features (e.g., overhead signs, signals, etc.).

"Utility" Indicates work on facilities other than the roadway such as telephone, electrical, cable television, water, or sewer. Note that a construction/maintenance zone may or may not be posted as such. If posted, the zone extends from the first "Construction Ahead" warning sign to the final "Construction Ends" sign. If there are no posted warning signs marking the start of the zone, the first or last traffic cone or barricade may be used instead.

LANE CLOSED

Indicate whether or not one or more lanes were closed in the construction zone.

ACTIVITY

Indicate whether the construction activity was, (1) on the road, (2) off the road, or (3) no activity at the time of the crash. If the zone is several miles long, use your own judgment if there was activity in the general area of the crash.

21. LOCATION:

Location of a crash is defined by (a) the road name on which the crash occurred, (b) the distance and direction of the point of impact from a crossroad (**located within the county of the crash**), and (c) the name of that cross road. Landmarks, freeway mile markers, private roadways, addresses, or factory gate numbers, cannot be used as a reference point to identify the location of a crash.

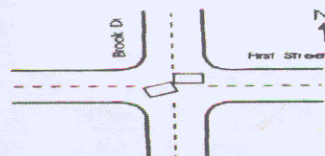
LOCATION	Road Name				Divided Roadway N S E W			
	Distance	<input type="checkbox"/> FT <input type="checkbox"/> MI	<input type="checkbox"/> North <input type="checkbox"/> South	<input type="checkbox"/> East <input type="checkbox"/> West	<input type="checkbox"/> Beginning of Ramp <input type="checkbox"/> End of Ramp			
	Intersecting Road				Divided Roadway N S E W			

(a) Enter all of the name(s), identifying number(s), and traffic direction (if a median exists) of a street or highway. Be sure to include route numbers; i.e., (M-24) northbound Main Street. When referencing divided roadway always **bubble** the direction of travel of the roadway involved; i.e., Southbound I-75 (S) I-75; Northbound US-23 (N) US-23.

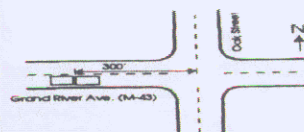
(b) Locate all crashes by **measuring** along a road from (1) THE POINT where the projected center lines of the intersecting roadways cross to (2) the point of impact of the unit(s), (**staying with county boundaries**).

A location AT an intersection will be rare. It is **at the exact point** where the projected center lines of the intersecting roadways cross.

LOCATION	Road Name				Divided Roadway N S E W			
	Distance	<input type="checkbox"/> FT <input type="checkbox"/> MI	<input type="checkbox"/> North <input type="checkbox"/> South	<input type="checkbox"/> East <input type="checkbox"/> West	<input type="checkbox"/> Beginning of Ramp <input type="checkbox"/> End of Ramp			
	Intersecting Road				Divided Roadway N S E W			



LOCATION	Road Name				Divided Roadway N S E W			
	Distance	<input type="checkbox"/> FT <input type="checkbox"/> MI	<input type="checkbox"/> North <input type="checkbox"/> South	<input type="checkbox"/> East <input type="checkbox"/> West	<input type="checkbox"/> Beginning of Ramp <input type="checkbox"/> End of Ramp			
	Intersecting Road				Divided Roadway N S E W			



Complete the "direction" bubbles as needed. If, however, the roadway runs northeast, southwest, etc., then **complete the two bubbles** to show route direction, i.e., NE, SW.

Most railroad crossings have a national inventory (NI) number. This NI number is usually attached to the railroad crossing signal support or the crossbuck sign support at the grade crossing. When locating crashes at or near a railroad crossing, the NI number can be used as a reference point just as you would use a street name. The NI number has a maximum of six numbers followed by a letter and is displayed at the crossing in this format 233-106-P. When using the NI number to reference a traffic crash, record it as the intersecting street with the following format RR233106P.

The sign on each ramp can be considered the street name assigned to that stretch of roadway and therefore follows the normal rules for any other street in the total system. There are two exceptions when using ramp signs in the crash location portion of the UD-10:

1. A ramp is considered starting (Figure 1) and/or ending (Figure 2) at a right angle to the gore (area of land where two roadways diverge or converge). See Appendix C, page 70 for definition of "gore."

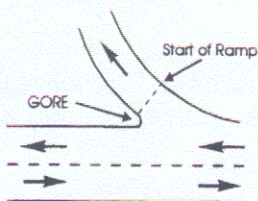


Figure 1

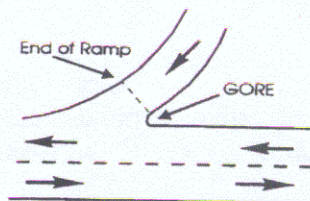


Figure 2

When the ramp intersects a crossroad, the imaginary centerlines shall be used (Figure 3).

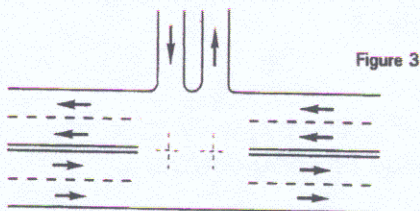
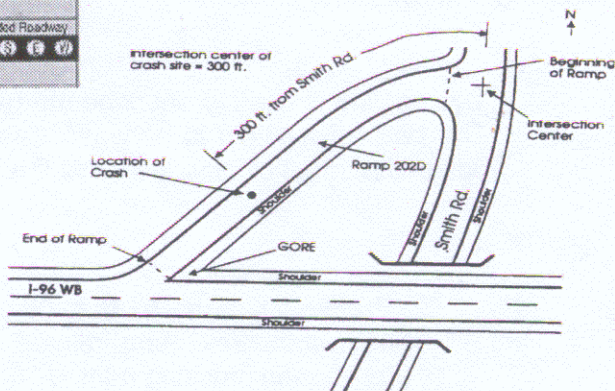


Figure 3

2. The intersecting street used for a ramp must be either the street at the beginning or the street at the end of the ramp, whichever street the distance given is measured from, (Figure 4).

Road Name	Divided Roadway			
Distance	<input type="checkbox"/> FT	<input type="checkbox"/> North	<input type="checkbox"/> East	<input type="checkbox"/> Beginning of Ramp
	<input type="checkbox"/> MI	<input type="checkbox"/> South	<input type="checkbox"/> West	<input type="checkbox"/> End of Ramp
Intersecting Road	Divided Roadway			

Figure 4



22. RELATION TO ROADWAY: (Mark only one choice)

Relation to Roadway (Location of First Impact)	
①	On Road
②	Median
③	Shoulder
④	Outside of Shoulder/Curb
⑤	Gore
⑥	Other/ Unknown

Identify the location of the **first impact of the crash** in relationship to the roadway.

On Road:

A crash occurs in the normally traveled area of the roadway, including left turn lanes and right and left turn flares. **Mark option 1 "On Road."**

A car leaves the thru lane, moves to the right into a parking lane, and strikes a parked car. The parked car is on the road, not on the shoulder.

Mark option 1 "On Road."

Median:

A car drives into the area between the inside left-hand pavement edges of a divided highway striking a bridge abutment. **Mark option 2 "Median."**

Shoulder:

A car drifts out of the normally traveled lanes, striking a car parked on the shoulder. **Mark option 3 "Shoulder."**

Outside of Shoulder/Curb:

A driver avoids a collision in an intersection by swerving off the road and striking a culvert end. **Mark option 4 "Outside of Shoulder/Curb."**

Gore:

A driver attempts to exit a freeway; however, the car goes off into the gore area and overturns. **Mark option 5 "Gore."**

The "**gore**" is the narrow area between the main roadway and an exit or entrance ramp where the two completely separate or come together. (See Figures 1 and 2 on Page 25).

23. AREA: (Mark only one choice)

Area
① ①
① ①
② ②
③
④
⑤
⑥
⑦
⑧
⑨

This section is used to describe the nature of the area in which the crash occurred. The basic distinction is between freeway and non-freeway areas. Select the one option that most clearly describes the nature of the collision area.

Freeway Crash - 01 thru 06

01 Entrance/exit ramp related

02 Median crossing related

03 Transition area (increase or decrease in travel lanes)

04 Rest area related

05 Scale/weigh station related

06 All other freeway areas

Non-Freeway Intersections - 07 thru 09

- 07 Within intersection (see page 76)
- 08 Driveway related (within 150 feet of nearest edge of intersection)
- 09 Intersection related - other

Other Non-Freeway Areas - 10 thru 21

- 10 Straight roadway--not related to other selections
- 11 Curved roadway--not related to other selections
- 12 Driveway related (not within 150 feet of intersection)
- 13 Parking related (legal roadside)
- 14 Transition area (increase or decrease in travel lanes)
- 15 Median crossing related
- 16 Railroad grade crossing-related
- 17 Rest area related
- 18 Scale/weigh station related
- 19 Non-traffic area
- 20 Other
- 21 Unknown

Example: A collision occurs on a freeway between a vehicle already on the freeway and another vehicle attempting to merge into thru traffic from a half-mile long acceleration lane. The crash occurs in an area marked with "Lane Ends" warning signs. **Mark 03 "Transition area (increase or decrease in travel lanes)."**

Example: A car fails to negotiate a freeway curve, leaves the roadway and overturns down an embankment. It does not occur near an exit ramp, rest area, or weigh station. **Mark 06 "All other freeway areas"** to document the area of this crash.

Example: A car exiting a service station driveway collides with a passing vehicle. The driveway is 100 feet from the nearest edge of the intersection. **Mark 08 "Driveway related (within 150 feet of nearest edge of intersection)."**

Example: A car traveling on a 4-lane road with two through lanes in each direction, collides with a car illegally parked in the right lane. If this crash occurred on a freeway, whether the roadway was straight or curved **mark option 06 "All other freeway areas."** If the road is straight and not a freeway, **mark option 10 "Straight Roadway."** If the road were curved, **mark option 11 "Curved Roadway."** **Option 13 "Parking related (Legal roadside)"** would not be marked because the vehicle struck was illegally parked.

Example: On a straight city street near an intersection, a motorist opens his/her driver's door to exit his/her legally parked vehicle. A passing car collides with the open door. The most descriptive code you could mark here is **13 "Parking-related,"** since that is more significant than the roadway being straight or the impact occurring near an intersection.

Example: A fatal car-pedestrian crash takes place in an off-street parking lot. **Mark 19 "Non-traffic area"** to reflect the nature of the crash area.

24. ROAD CONDITION: (Mark only one choice)

Road Condition
(Mark Only One)

1

Dry

2

Wet

3

Icy

4

Snowy

5

Muddy

6

Slushy

7

Debris

8

Other/
Unknown

Mark the one most significant condition that applies to the crash. (Other conditions may be described in the "Crash Diagram and Remarks" section.)

25. TOTAL LANES:

Total Lanes

0

0

1

1

2

2

3

3

4

4

5

5

6

6

7

7

8

8

9

9

Mark the total number of lanes, curb to curb, or edge of roadway (excluding shoulders) of the roadway which is listed as the crash location. Continuous center-turn lanes shall be included in the count, but legal parking lanes (whether occupied or not) and right and left turn flares shall not be counted. If the crash took place on a divided roadway, indicate the number of lanes available to a single direction of traffic at the point where the crash took place. If the crash happened on other than a roadway, mark "0."

26. SPEED LIMIT:

Speed Limit

1

1

2

2

3

3

4

4

5

5

6

6

7

7

Posted

Yes

Yes

No

No

Indicate the speed of the road on which the crash took place and indicate whether or not the speed limit was posted. If the crash took place within an intersection, enter the highest speed limit of the roads involved .

POSTED ROADWAYS:

Posted speed limits are those speed limits posted through the use of regulatory signs (black numbers on a white background) or on electronic variable message signs.

Do not consider "advisory speeds" as posted speed limits. Advisory speed limits are the black numbers on yellow background signs posted underneath advance warning signs such as "Curve Ahead" signs.

Advisory speeds should be shown in the Remarks section.

UNPOSTED ROADWAYS:

Do not estimate a "safe speed" limit based upon Basic Speed Law and the conditions existing at the time and place of the crash. You may need to refer to Michigan Motor Vehicle Code Section 627, re: prima facie speed limits in (unposted) business, residential and park districts.

Example: A crash occurs on a rural road. There are no posted speed limit signs and the area is neither a business, residential, park, or school zone. The roadway is snow-covered at the time of the crash. Mark "55" and "No" in this instance.

27. TRAFFICWAY:

Traffic Way	①	②	③	④
-------------	---	---	---	---

A code indicating whether or not a trafficway is divided and whether it serves one-way or two-way traffic. Used in classifying crashes as well as identifying the environment of a particular crash. Important to guide future trafficway design and traffic control.

Indicate the degree of trafficway division at the site of the crash.

- 01 Not physically divided (Two-way trafficway)
- 02 Divided highway, median strip, **without** traffic barrier
- 03 Divided highway, median strip, **with** traffic barrier
- 04 One-way trafficway

28. ACCESS CONTROL:

Access Control	①	②	③
----------------	---	---	---

The degree that access to abutting land, light, air, or view in connection with a highway is fully or partially controlled by public authority. Highly correlated with crash rates. Important to guide future highway design and traffic control.

Indicate the degree access to an adjoining roadway is controlled by public authority.

- 01 No access control (unlimited access)
- 02 Full access control (ramp entry & exit only)
- 03 Other (partial access control)

Note: Access is controlled by roadway configuration, not Traffic Control Devices, i.e., No Left Turn sign, etc.

29. DRIVER CONDITION: (At least one bubble must be marked)

Driver Condition	1	2	3	4	5	6	7	8	9	99
------------------	---	---	---	---	---	---	---	---	---	----

The condition of the driver which may have contributed to the crash. Important for evaluating the effect that driver fatigue, medications, alcohol, drugs, or other conditions have on the crash.

Indicate the apparent condition of the driver at the time of the crash.

- | | |
|----------------------|-------------------------|
| 01 Appeared normal | 06 Asleep |
| 02 Had been drinking | 07 Medication |
| 03 Illegal drug use | 08 Distracted |
| 04 Sick | 09 Using cellular phone |
| 05 Fatigue | 99 Unknown |

30. UNIT NUMBER:

Unit Number

1	6
2	7
3	8
4	9
5	

Every unit involved in a crash must be given a unit number. Each of these units will be described as either a motor vehicle (including a parked vehicle), bicycle, pedestrian or engineer (train) as outlined in Section 31, page 31. An animal (horse, deer, cow, etc.) is not a traffic unit.

If a horseback rider is involved in a crash, the rider will be entered as a pedestrian unit, the horse will not be considered a unit. If a horse and buggy are involved in a crash, they will not be entered as a unit, each human occupant of the buggy will be listed as a separate pedestrian unit.

NOTE: The vehicle designated as Unit #1 must be on the first page of any UD-10 submitted whether it is determined to be “at fault” or not.

31. UNIT TYPE:

Unit Type	
<input type="radio"/> MV <input type="radio"/> P	
<input type="radio"/> B <input type="radio"/> E (train)	

For each unit involved in the crash, you **must select one** of the four Unit Types identified:

MV - Motor vehicle (**Any motorized unit designed to be operated on land**)

P - Pedestrian

B - Bicyclist

E - Engineer (railroad/train)

The following examples are intended to assist you in selecting the correct code.

(MV) Motor Vehicle

- "Standard" motor vehicles
cars, pickups, vans, buses,
trucks, motorcycles, etc.
- Emergency vehicles
police, fire, ambulance
- Farm equipment
farm tractors, combines, etc.
- Off Road Vehicles (ORV)
- Snowmobiles
- Mopeds
- All-terrain vehicles (ATV)
- Dirt bikes, motorbikes, go-carts
- Garden tractors
- Motorized wheelchairs
- Cushman scooters
- * Road maintenance equipment
dump trucks, snowplows, road
graders
- * Construction equipment
rollers, front-end loaders,
scrapers, mobile cranes, etc.

(P) Pedestrian

- Person on foot
- Person on skis, skates or rollerblades
- Rider of horse
- Horse and buggy (each occupant,
including the driver, will be listed as a
separate pedestrian unit)
- Non-motorized wheel chair

(B) Bicyclist

- All forms of pedalcycles, including
those with one, two, and three wheels

(E) Engineer

- Engineer (railroad/train)

* **Construction equipment and road maintenance vehicles WHILE ACTUALLY ENGAGED IN WORK UPON THE SURFACE OF A HIGHWAY** (such as plowing snow) should be listed as Special Mobile Equipment (MCL 257.62) in the remarks section only of the UD-10. Operators can still be cited if they are responsible for a crash.

32. DRIVER:

State	Driver License Number				Date of Birth			License Type		Sex				
					Month	Day	Year	<input type="radio"/> O <input type="radio"/> C <input type="radio"/> M <input type="radio"/> R	<input type="radio"/> M <input type="radio"/> F					
First Name					Middle					Last				
Street Address					Phone Number									
City					State					Zip				

The person behind the wheel in physical control of the vehicle is considered the driver. A person seated behind the steering wheel of a towed vehicle is not a "driver." The person would be considered a passenger in a trailing unit (See Section 58, page 46) and their vehicle would be a "towed auto" (See Section 57, page 45).

Do not list driver information for an UNOCCUPIED parked vehicle. See page 9 for information on parked vehicles.

STATE:

Enter the state in which the driver license was issued.

STANDARD STATE NAME ABBREVIATIONS

Alabama	AL	Nebraska	NE
Alaska	AK	Nevada	NV
Arizona	AZ	New Hampshire	NH
Arkansas	AR	New Jersey	NJ
California	CA	New Mexico	NM
Colorado	CO	New York	NY
Connecticut	CT	North Carolina	NC
Delaware	DE	North Dakota	ND
Florida	FL	Ohio	OH
Georgia	GA	Oklahoma	OK
Hawaii	HI	Oregon	OR
Idaho	ID	Pennsylvania	PA
Illinois	IL	Rhode Island	RI
Indiana	IN	South Carolina	SC
Iowa	IA	South Dakota	SD
Kansas	KS	Tennessee	TN
Kentucky	KY	Texas	TX
Louisiana	LA	Utah	UT
Maine	ME	Vermont	VT
Maryland	MD	Virginia	VA
Massachusetts	MA	Washington	WA
Michigan	MI	West Virginia	WV
Minnesota	MN	Wisconsin	WI
Mississippi	MS	Wyoming	WY
Missouri	MO		
Montana	MT		

DRIVER LICENSE NUMBER:

Enter the license number of the driver. **Do not list Driver License Number for a Bicyclist, Pedestrian, or Train Engineer. Do not list driver information for an unoccupied-parked vehicle.**

NAME:

Enter first name, middle name or initial, last name.

ADDRESS:

Enter the complete street, city/twp., state, and zip code of the driver. If the zip code is the extended nine-digit code, enter all nine digits.

PHONE NUMBER:

Enter the area code and phone number where the driver is most likely to be contacted.

DATE OF BIRTH:

Enter the driver's date of birth: **MM/DD/CCYY**. There **must** be a total of eight digits.

LICENSE TYPE: (More than one can be marked)

Mark all code letters as displayed in the "License Type" box on the driver license.

"O" - Operators	"CY"- Cycle
"C" - Chauffeurs	"F"- Farm
"M" - Moped	"R"- Recreational Double

Note: If a driver's license is suspended or revoked, indicate in the remarks section.

See page 65 for examples.

SEX:

Mark driver's sex, M or F.

33. IGNITION INTERLOCK/ALCOHOL/DRUGS:

Interlock	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Refused	<input type="radio"/> Not offered	(Submit Results To FARS When Available)
Alcohol	<input checked="" type="radio"/> Yes <input type="radio"/> No	Test Type: <input type="radio"/> Field <input type="radio"/> PBT <input type="radio"/> Breath <input type="radio"/> Blood <input type="radio"/> Urine	Test Results _____	
Drugs	<input checked="" type="radio"/> Yes <input type="radio"/> No	Test Type: <input type="radio"/> Blood <input type="radio"/> Urine	Test Results _____	

IGNITION INTERLOCK:

Indicate **Yes** or **No**, whether an Ignition Interlock device is installed in a vehicle involved in the crash. **Michigan Motor Vehicle Code, Sec. 257.622a. Effective October 1, 1999**

NOTE: Ignition Interlock device means an alcohol concentration measuring device that prevents a motor vehicle from being started at any time without first determining through a deep lung sample the operator's breath alcohol level. **Michigan Vehicle Code, Sec. 257.625L (6)**

The FARS Unit requests that you submit information on the blood alcohol/drug test results of **all persons** involved in fatal crashes (including surviving drivers, passengers, pedestrians, and bicyclists) if available.

ALCOHOL: (More than one bubble may be marked)

Interlock	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Refused	<input type="radio"/> Not offered	(Submit Results To FARS When Available)
Alcohol	<input checked="" type="radio"/> Yes <input type="radio"/> No	Test Type: <input type="radio"/> Field <input type="radio"/> PBT <input type="radio"/> Breath <input type="radio"/> Blood <input type="radio"/> Urine	Test Results _____	
Drugs	<input checked="" type="radio"/> Yes <input type="radio"/> No	Test Type: <input type="radio"/> Blood <input type="radio"/> Urine	Test Results _____	

Indicate whether, in your opinion, drinking had been involved. Next, indicate the type of test, if any, that was administered. If a test was given, enter the test results on the blank line. If drinking was involved, but no test was given, indicate whether the test was "refused" by the subject or "not offered" by the officer.

If multiple chemical tests were administered and results obtained, record the test results. **More than one bubble may be marked.** Other tests and results may be described in the "Remarks" section.

NOTE: A blood test is required by law for all deceased drivers or deceased railroad engineers involved in a traffic crash. Do not delay submission of a UD-10 report while awaiting the results of this test. As soon as these test results become available, call the Fatality Analysis Reporting System (FARS) at (517) 322-6910 or (517) 322-5030.

The "Field" entry refers to the administration of any field sobriety tests (also known as "psycho-physical tests"). If you conducted any type of balance test, "finger-to-nose," or similar type of field sobriety test(s), mark "Field." Otherwise leave that entry blank.

DRUG: (More than one bubble may be marked)

Interlock	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Refused	<input type="radio"/> Not offered	(Submit Results To FARS When Available)
Alcohol	<input checked="" type="radio"/> Yes <input type="radio"/> No	Test Type: <input type="radio"/> Field <input type="radio"/> PBT <input type="radio"/> Breath <input type="radio"/> Blood <input type="radio"/> Urine	Test Results _____	
Drugs	<input checked="" type="radio"/> Yes <input type="radio"/> No	Test Type: <input type="radio"/> Blood <input type="radio"/> Urine	Test Results _____	

Indicate whether, in your opinion, drugs had been involved. Next, indicate the type of test, if any, that was administered. If a test was given, enter the test results on the blank line.

If multiple chemical tests were administered and results obtained, record the test results. **More than one bubble may be marked.** Other tests and results may be described in the "Remarks" section.

34. POSITION:

Position

List the driver's position in the box marked "POSITION." The driver position is usually "1," which is the left-side front seat. For all vehicles with in-line seating, such as motorcycles and snowmobiles, the driver is also in position "1." If this unit is a bicyclist, pedestrian or engineer, enter the corresponding code B, P or E.

- | | | | |
|----|---------------------------|----|--|
| B- | Bicyclist | 10 | Sleeper section |
| P- | Pedestrian | 11 | Other enclosed passenger area/ cargo area |
| E- | Engineer (railroad/train) | 12 | Other unenclosed passenger area/cargo area |
| | | 13 | Riding in/on trailing unit |
| | | 14 | Riding on vehicle exterior |
| | | 15 | Unknown |



Motorcycles/In-line seating

- | | |
|---|--------------------------|
| 1 | Motorcycle driver |
| 4 | Motorcycle passenger one |
| 7 | Motorcycle passenger two |

35. RESTRAINT: (List only one code for restraint use)

Restraint

List the **type of restraint** used by the driver, or if appropriate, whether a **helmet** was worn. Refer to Section 39, page 37 for information on Airbags.

- | <u>Restraint</u> | | <u>Helmet</u> | |
|------------------|--|---------------|--------------------|
| 01 | No belts available | 10 | Helmet worn |
| 02 | Shoulder belt only used | 11 | Helmet not worn |
| 03 | Lap belt only | 12 | Helmet use unknown |
| 04 | Shoulder and lap belt used | | |
| 05 | No belts used | | |
| 06 | Child restraint used | | |
| 07 | Child restraint not used, not available, or improper | | |
| 08 | Restraint failure | | |
| 09 | Restraint use unknown | | |

36. AMBULANCE/HOSPITAL:

Ambulance/Hospital

Enter the five-digit ambulance code if known, or the name of the ambulance service, and the hospital where the individual was taken for treatment.

37. INJURY:

Injury
K
A
B
C
O

INJURY SEVERITY CLASSIFICATION

K - FATAL INJURY is any injury that results in death due to a motor vehicle traffic crash.

A - INCAPACITATING INJURY is any injury, other than fatal, which prevents the injured person from walking, driving, or normally continuing the activities which he or she was capable of performing prior to the motor vehicle traffic crash.

INCLUDES: Severe lacerations, broken or distorted limbs, skull fracture, crushed chest, internal injuries, unconscious when taken from the crash scene, unable to leave crash scene without assistance.

EXCLUDES: Momentary unconsciousness.

GENERAL: Determinations are made at the time the injured person leaves the crash scene. It is not necessary to consult with doctors or hospitals unless information is not otherwise available. Apparent condition immediately after the crash does not govern classification because the person may recover from hysteria quickly or may begin to feel the effects of internal or other injuries between the time of the crash and time of leaving the scene.

a. Medical treatment at the crash scene or later makes no difference. What the person does at the scene is important.

b. Hospitalization normally will be required for incapacitating injuries.

c. Duration of the disability after injury makes no difference. Incapacitation is important.

d. Developments after leaving the scene make no difference except in case of death.

B - NON-INCAPACITATING EVIDENT INJURY is any injury, other than fatal and incapacitating, which is evident at the scene of the crash.

INCLUDES: Lump on head, abrasion, minor lacerations.

EXCLUDES: Limping (the injury cannot be seen).

EXAMPLE: Pedestrian is unconscious on the ground after crash; his clothes are torn and blood oozes from abrasions; when the ambulance arrives he is conscious, able to give information, and walks around; he goes to the hospital in the ambulance, but is able to sit up in it; there is no evidence that he is incapacitated.

C - POSSIBLE INJURY is any injury reported or claimed which is not a fatal, incapacitating, or non-incapacitating evident injury.

INCLUDES: Momentary unconsciousness. Claim of injuries not evident. Limping, complaint of pain, nausea, hysteria.

GENERAL: Possible injuries are those which are claimed or reported, or indicated by behavior, but not by wounds.

EXAMPLE: Occupant complains of pain but shows no signs of bleeding or other wound; leaves the scene in a taxi to keep an appointment; he dies; this is possible injury when classified at the time of leaving the scene, but should be changed to "K" upon notice of death.

O - NO INJURY is a situation in which there is no reason to believe that the person received any bodily harm from the motor vehicle traffic crash.

Source: National Safety Council "Manual on Classification of Motor Vehicle Traffic Accidents" (Sixth Edition), 1996.

38. EJECTED/TRAPPED:

Ejected	<input type="radio"/> Yes
Trapped	<input type="radio"/> Yes

If the driver was ejected or partially ejected from the vehicle, fill in the "Yes" bubble.

If the driver was trapped as a result of the crash, and mechanical means were needed to extricate the driver, mark the "Yes" bubble.

It may be appropriate to mark ejected and trapped, e.g., a driver whose body is found hanging outside the driver's door, but whose feet are pinned in to the point where mechanical means **must** be used to free them.

39. AIRBAG DEPLOYED:

Airbag Deployed
<input type="radio"/> ① Yes <input type="radio"/> ② No
<input type="radio"/> ③ Not Equipped

From the list, mark the appropriate bubble. For vehicles with airbags installed list **Yes** or **No**, based on your visual observation at the scene. For older model vehicles without airbags installed, fill in the "**Not Equipped**" bubble.

40. CITATION ISSUED:

Citation Issued
<input type="radio"/> ① Hazardous
<input type="radio"/> ② Other

If a citation was issued, indicate whether the offense was "hazardous," "other," or both. In the space provided, you may "write in" the offense code (four-digit code used by Michigan State Police).

41. HAZARDOUS ACTION: (Choose the most significant)

Hazard Action	
00	00
01	01
02	02
03	03
04	04
05	05
06	06
07	07
08	08
09	09

Hazardous action coding reflects whether, in the investigating officer's opinion, a person is "at fault" in any way, i.e., did the person's action(s) contribute to the crash? A coded entry shall be made regardless of whether a citation was issued or a physical arrest was made.

Choose the most significant "Hazardous Action" that applies. If "No Hazardous Action" use code "00."

- | | |
|------------------------------|---|
| 00 None | 09 Improper turn |
| 01 Speed too fast | 10 Improper/no signal |
| 02 Speed too slow | 11 Improper backing |
| 03 Failed to yield | 12 Unable to stop in assured clear distance |
| 04 Disregard traffic control | 13 Other |
| 05 Drove wrong way | 14 Unknown |
| 06 Drove left of center | 15 Reckless driving |
| 07 Improper passing | 16 Careless/negligent driving |
| 08 Improper lane use | |

42. VEHICLE REGISTRATION:

Vehicle Registration	State

Enter the vehicle registration number and the two-letter abbreviation where the vehicle is registered.

United States - State abbreviation, i.e., (MI) **For state abbreviations see page 32**

Canada - Province abbreviation, i.e., (QE)

U. S. Government or International, i.e., - Double X's (XX)

For vehicles with trailers, enter only the registration of the vehicle towing the trailer. **Do not** enter the registration for the trailer in this space. (Trailer registration data may be entered in the "Crash Diagram and Remarks" section.) If the registration is improper, write "Improper" in the space and explain in "Remarks" section.

43. VIN:

VIN

Enter the VIN from the vehicle identification plate on the driver's side dashboard, driver's door, or adjacent door post. Do not rely on the registration certificate for this information.

44. VEHICLE DESCRIPTION:

Vehicle Description (year, make, color)

Describe the vehicle's year, make, model, color, (98, 4-door, blue; or 98, Pontiac, silver).

45. TOTAL OCCUPANTS:

Total Occup	
<input type="radio"/> 0	<input type="radio"/> 0
<input type="radio"/> 1	<input type="radio"/> 1
<input type="radio"/> 2	<input type="radio"/> 2
<input type="radio"/> 3	<input type="radio"/> 3
<input type="radio"/> 4	<input type="radio"/> 4
<input type="radio"/> 5	<input type="radio"/> 5
<input type="radio"/> 6	<input type="radio"/> 6
<input type="radio"/> 7	<input type="radio"/> 7
<input type="radio"/> 8	<input type="radio"/> 8
<input type="radio"/> 9	<input type="radio"/> 9

List the total occupants of the vehicle by marking the appropriate bubbles. If the number of occupants is unknown, enter as 99.

46. INSURANCE:

Insurance

Enter insurance company name, and policy number.

47. TOWED TO/BY:

Towed To/By

If the vehicle is towed, include the name of the wrecker service. If driven away or removed by owner or driver, enter this information (such as, Driven/Driver, Towed/Owner, etc.).

48. VEHICLE DIRECTION:

Vehicle Direction

☐ North ☐ East
☐ South ☐ West

Complete the bubble(s) which identifies the direction the unit was traveling **prior to** the crash, loss of control, or turning movement. (i.e., N for north, N and E for northeast).

Example: Unit #1 traveling northbound turns left in front of, and is struck by, Unit #2 which is traveling southbound. This should be coded as a Head On-Left Turn Crash showing Unit #1 **Direction** as North, and Unit #2 as South.

49. SPECIAL VEHICLES:

Special Vehicles

① ② ③ ④ ⑤ ⑥

Indicate whether the vehicle involved in the crash was one of the special vehicle types listed below. If this vehicle is not one of these types, leave blank.

- | | |
|---|------------------------------------|
| 1. Police vehicle | 4. Ambulance |
| 2. Fire vehicle | 5. Farm equipment (non-registered) |
| 3. Bus (commercial,
private, school) | 6. Construction equipment |

POLICE VEHICLE: Mark "1" if the vehicle is owned by a governmental law enforcement agency. Mark "1" in all cases whether the vehicle is being used routinely (e.g., patrol), in pursuit of a fleeing vehicle, or responding to an emergency call.

FIRE VEHICLE: Mark "2" only when the vehicle is owned by a fire department (including volunteer fire department).

Example: A volunteer fire fighter was involved in a crash while responding to a fire call. He/she was using his/her personal vehicle, including emergency lights and siren. Leave the "Special Vehicle" section blank. The vehicle is not considered a fire vehicle since it is not a fire department-owned vehicle.

Example: A city- or township-owned fire truck was involved in a traffic crash. Mark "2" - Fire Vehicle.

BUS: Mark "3" if the vehicle is a commercial, private, or church bus. See Appendix C for definitions of "bus" and "school bus."

Example: An old commercial bus converted to a motor home was involved in a traffic crash. Leave Option "3" blank in this instance because the vehicle no longer meets the definition of a bus, it is a motor home.

AMBULANCE: The "4" option will be marked whenever the vehicle is a privately or publicly owned ambulance.

FARM EQUIPMENT: Bubble "5" - Farm Equipment shall be marked if the vehicle is an implement of husbandry that cannot be registered with the Michigan Department of State, (i.e., farm tractors and combines). Farm-owned pickup trucks and truck-tractor/semi-trailer combination vehicles can be registered, therefore are not farm equipment.

CONSTRUCTION EQUIPMENT: Bubble "6" shall be marked when the vehicle involved in the crash is a type of construction equipment or road maintenance equipment that would fit the definition of "Special Mobile Equipment" as defined by Section 257.62 of the Motor Vehicle Code. This includes vehicles not designed for ordinary highway use, but which would only be on a highway incidentally to get from one job site to another or for road maintenance purposes (e.g., grading road, plowing snow). Front-end loaders, mobile cranes, road graders, bulldozers, and similar equipment would be considered "construction equipment" for purposes of completing a UD-10 traffic crash report. A dump truck with a front or underbody plow would not be listed as construction equipment.

50. LOCATION OF GREATEST DAMAGE: (Mark only one bubble)

Location of Greatest Damage

0

1

2

3

4

5

6

7

8

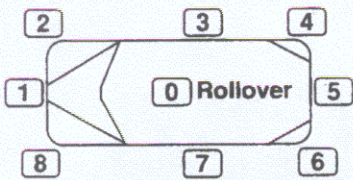
9

10

11

12

Mark the bubble which identifies the **location of the most severe** damage to the vehicle. **NOTE: Mark only one bubble.** If more than one area sustains equal damage, choose number 10 (multiple).



- 0 Rollover

1 Front, Center

2 Front, Right

3 Side, Right

4 Rear, Right

5 Rear, Center

6 Rear, Left
- 7 Side, Left

8 Front, Left

9 Undercarriage

10 Multiple

11 Other/Unknown

12 None

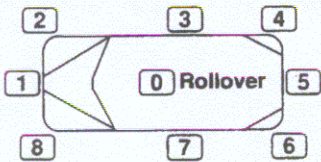
Example: Vehicle #2 is rear-ended by Vehicle #1, pushing #2 into the back of Vehicle #3. If the damage to the front and rear of Vehicle #2 is equal or near equal, mark "10" for multiple damage.

Example: A car leaves a roadway, enters a ditch, strikes the far slope and overturns. The right front corner has minor damage from contacting the far slope, but the entire roof is crushed in the rollover. Mark "0" to record the roof damage as the area of greatest damage.

51. FIRST IMPACT: (Mark only one bubble)

First Impact

Indicate the **location of the first** point of impact, using the same coding choices used in the "Location of Greatest Damage" section.



- 0 Rollover

1 Front, Center

2 Front, Right

3 Side, Right

4 Rear, Right

5 Rear, Center

6 Rear, Left
- 7 Side, Left

8 Front, Left

9 Undercarriage

10 Multiple

11 Other/Unknown

12 None

52. EXTENT OF VEHICLE DAMAGE:

Extent of Vehicle Damage							
0	1	2	3	4	5	6	7

The purpose of this section is to describe the degree of damage to a vehicle in a crash. Mark the number that indicates the severity on a scale from 0 to 7, with "0" used to indicate no damage. "7" indicates a vehicle that is damaged to the point where it clearly cannot be repaired.

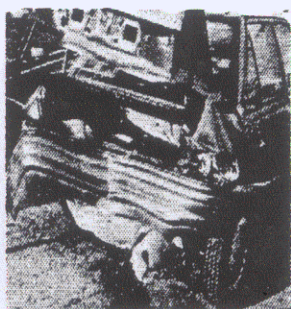


SLIGHT

0 1 2 3 4 5 6 7



MODERATE



HEAVY

The State of Michigan does not require you to estimate the monetary value of damage. Your department may wish you to do so; that information may be entered in the "Remarks" section.

Your extent of vehicle damage coding is subjective; however, try to indicate how much functional damage the vehicle sustained in **this** crash. Try to ignore the dollar amount of damage done, the age of the vehicle, and insurance company repair vs. salvage practices. Also, try to disregard any damage to the vehicle from a previous crash.

53. DRIVEABLE:

Driveable
<input type="radio"/> Yes
<input type="radio"/> No

Mark "Yes" or "No" as to whether the vehicle is capable of being driven from the scene. If the vehicle is towed due to an incapacitated driver or other disabling mechanical problem **not** caused by the crash, mark "yes."

Example: A driver is involved in a minor property damage crash. No damage prevents the car from being driven, but the driver states he is "too shook up" to drive. The vehicle is towed. Mark driveable "yes" in this instance.

Though damaged, if a vehicle could be driven from the scene without the **need** for special tools or parts, it would still be considered "driveable." If simply changing a flat tire or prying a piece of damaged fender away from a tire so it can rotate would enable the vehicle to be driven away, then the vehicle shall be considered "driveable."

54. VEHICLE TYPE:

Vehicle Type		
<input type="radio"/> PA	<input type="radio"/> CY	<input type="radio"/> OR
<input type="radio"/> VA	<input type="radio"/> MO	<input type="radio"/> Other
<input type="radio"/> PU	<input type="radio"/> GC	<input type="radio"/> Truck/Bus
<input type="radio"/> ST	<input type="radio"/> SM	(Complete Truck/Bus Section)

Use the following Department of State "two letter" code to identify the type of vehicle being reported.

NON-COMMERCIAL VEHICLE TYPES

PA	Passenger car and station wagon
VA	Van, motor home
PU	Pickup truck
ST	Small truck (under 10,000 lbs.)
CY	Cycle
MO	Moped
GC	Go-cart
SM	Snowmobile
OR	Off road vehicle (ATV type)
Other	Non-registered farm equipment, combine, front end loader
Truck/Bus	Complete the Truck/Bus Section

If you determine this vehicle to be a truck or bus, mark Truck/Bus and complete the Truck/Bus section of the UD-10.

NOTE: For a vehicle not listed in this section, such as a farm tractor or a road grader, list the vehicle as "Other."

If this is a commercial vehicle, the "Truck/Bus" bubble must be coded otherwise the CDL information on the reverse side of the UD-10 will not be picked up for the vehicle.

55. VEHICLE USE:

Vehicle Use

① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪

Complete the bubble which best identifies the type of use (operation) of the vehicle at the time of the crash.

1. Private
2. Commercial (business)
3. In pursuit/On emergency (police, fire (including volunteer firemen in personal vehicle), ambulance during an emergency run)
4. Farm use
5. School/education
6. Club/church or any vehicle displaying a "Y" registration plate being used for that function
7. Military vehicle
8. Other government use, government owned, federal, state or local. Police and fire vehicles when not in pursuit/on emergency
9. Utility (gas, electric, cable television company, etc.)
10. Road construction (road maintenance)
11. Other

Example: A driver is using a personal vehicle to deliver items (e.g., pizza, mail, newspapers, etc.) and is involved in a crash. Mark "2" because the driver was engaged in a commercial/business function at the time.

Example: A patrol car involved in a crash while pursuing another vehicle would be a "3," however, a crash while in a non-pursuit or non-emergency response mode would be an "8" - Other government use.

Example: A commercial truck is involved in a crash. Mark "2". If you learned that the truck was borrowed or rented for purposes of moving personal goods, the correct use code would be "1" - Private.

Example: A volunteer fireman driving his personal vehicle (with lights and siren on) to a fire will be listed as "3. On emergency." However, this vehicle will not be listed as "8. Fire vehicle."

56. VEHICLE DEFECT:

Vehicle Defect					
①	②	③	④	⑤	⑥

If the investigating officer finds a vehicle defect that may have contributed to the crash, mark the appropriate bubble to note the most significant defect. Other defects may be noted in the "Remarks" section.

NOTE: Choose only one of the following:

1. Brakes
2. Lights/reflectors
3. Steering
4. Tires/wheels
5. Windows
6. Other

57. PRIVATE TRAILER TYPE: (Mark only one of the following)

Private Trailer Type						
①	②	③	④	⑤	⑥	⑦

Only small personal utility trailers would be listed in this section. It is the design of the trailer rather than its use that is being sought here. For example, if a commercial truck-tractor with a flatbed semi-trailer is being used in farm operations, it will not be listed in this section. It will be listed in the Truck/Bus section. If the trailer is designed specifically for farm use, such as a hay wagon, then it will be listed in this section. If two trailers listed below make up a recreational double, list only the recreational double.

- | | |
|-------------------|------------------------|
| 1. Utility | 5. Towed auto |
| 2. Travel trailer | 6. Recreational double |
| 3. Boat trailer | 7. Other |
| 4. Farm equipment | |

Example: A pickup truck involved in a crash was pulling a fifth-wheel travel trailer and a boat trailer. This combination would be a "recreational double," thus Option "6" shall be used.

Example: A car towing another car is involved in a crash. The towed car is struck from the rear. Mark option "5 - Towed auto."

Example: A pickup truck pulling a farm-type flatbed trailer is involved in a crash. Option "4 -Farm equipment" shall be used in this instance. If the farmer loaned the trailer for use in a parade, it would still be a "4" because the design of the trailer is the key factor, not the use at the time of the crash.

58. PASSENGER:

First Name			Middle			Last			Date of Birth			Sex <input type="radio"/> M <input type="radio"/> F	
Month			Day			Year							
Street Address						Phone Number							
City			State			Zip							

First Name			Middle			Last			Date of Birth			Sex <input type="radio"/> M <input type="radio"/> F	
Month			Day			Year							
Street Address						Phone Number							
City			State			Zip							

There are blocks for two injured or uninjured passengers per vehicle. If more passenger blocks are **needed** for injured passengers, they must be placed in a passenger section on a second UD-10 form. If you have additional uninjured passengers, see Section 65, page 47.

NAME:

Enter first name, middle name or initial, last name.

ADDRESS:

Enter the complete address, city, state, and zip code of the passenger. If the zip code is the extended nine-digit code, enter all nine digits.

PHONE NUMBER:

Enter the phone number, including area code, where the passenger is most likely to be contacted.

DATE OF BIRTH:

Enter the passenger's date of birth: **MM/DD/CCYY**. There **must** be a total of eight digits.

SEX:

Mark passenger's sex, M or F.

59. EJECTED/TRAPPED: See Section 38, page 37.

Ejected	<input type="radio"/> Yes
Trapped	<input type="radio"/> Yes

58. PASSENGER:

First Name			Middle			Last			Date of Birth			Sex <input type="radio"/> M <input type="radio"/> F	
Month			Day			Year							
Street Address						Phone Number							
City			State			Zip							
First Name			Middle			Last			Date of Birth			Sex <input type="radio"/> M <input type="radio"/> F	
Month			Day			Year							
Street Address						Phone Number							
City			State			Zip							

There are blocks for two injured or uninjured passengers per vehicle. If more passenger blocks are **needed** for injured passengers, they must be placed in a passenger section on a second UD-10 form. If you have additional uninjured passengers, see Section 65, page 47.

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PHONE NUMBER:

Enter the phone number, including area code, where the passenger is most likely to be contacted.

DATE OF BIRTH:

Enter the passenger's date of birth: **MM/DD/CCYY**. There **must** be a total of eight digits.

SEX:

Mark passenger's sex, M or F.

59. EJECTED/TRAPPED: See Section 38, page 37.

Ejected	<input type="radio"/> Yes
Trapped	<input type="radio"/> Yes

60. **INJURY:** See Section 37, Page 36.

Injury	<input type="radio"/> K	<input type="radio"/> B	<input type="radio"/> O
	<input type="radio"/> A	<input type="radio"/> C	

61. **POSITION:** See Section 34, Page 35.

Position

62. **RESTRAINT:** See Section 35, Page 35.

Restraint

63. **AMBULANCE/HOSPITAL:** See Section 36, Page 35.

Ambulance/Hospital

Enter the five-digit ambulance code if known, or the name of the ambulance service, and the hospital where the individual was taken for treatment.

64. **AIRBAG DEPLOYED:**

Airbag Deployed
<input type="radio"/> 1 Yes <input type="radio"/> 2 No
<input type="radio"/> 3 Not Equipped

Mark the appropriate bubble. (See Section 39, page. 37)

65. **OWNER/WITNESS/UNINJURED PASSENGER:**

<input type="radio"/> Owner <input type="radio"/> Witness	Name	Address	Phone Number	Age	Pos.	Rest.
<input type="radio"/> Uninjured Passenger						
<input type="radio"/> Owner <input type="radio"/> Witness	Name	Address	Phone Number	Age	Pos.	Rest.
<input type="radio"/> Uninjured Passenger						

The owner, witness or uninjured passenger information may be placed in this area. **Do not use this area for recording information on injured passengers.**

Indicate whether the person you are entering information for is a owner, witness of the vehicle or an uninjured passenger, then complete the name, address and phone number information for this person.

If this individual is an uninjured passenger, you **must** also complete the age, position (see Section 34, page 35) and restraint codes (see Section 35, page 35).

66. PERSON ADVISED OF DAMAGED TRAFFIC CONTROL:

Person Advised of Damaged Traffic Control	Date	Time	Name
---	------	------	------

When there is damage to traffic control devices, telephone the proper road authority and report the damage. **Any perceived engineering problems should also be reported to the proper road authority.** Obtain the name of the person contacted and enter the date and time that person was notified, and their name.

67. DAMAGED PROPERTY:

Damaged Property

When property other than vehicles is damaged, identify the object, including domestic animals, deer, and traffic control devices, etc.

68. PUBLIC:

Public
<input type="radio"/> Y
<input type="radio"/> N

Mark the "Y" (Yes) bubble if the damaged property was publicly owned.
Examples of publicly owned property:

- Impact Attenuator
- Bridge/Pier/Abutment
- Bridge Parapet End
- Bridge Rail
- Guardrail Face
- Guardrail End
- Median Barrier
- Highway Traffic Sign Post
- Luminaire/Light Support
- Utility Pole
- Culvert
- Fence
- Highway/Rail Signal

This section does not apply to deer and domestic animals.

69. OWNER AND PHONE NUMBER OF DAMAGED PROPERTY:

Owner & Phone

Enter the full name and complete phone number of the owner of the damaged property.

70. SERIAL OVERRIDE NUMBER:

Serial Override Number

Each form is designed to record information pertaining to two units. Each form provides space for two injured passengers or up to four uninjured passengers per unit. If there are more than two units involved in the crash, additional forms shall be used.

The use of an additional form makes it necessary to "override" the preprinted serial number of the additional form(s) you are using. Enter the preprinted serial number of the first form in the "Serial Override Number" box of all additional forms you submit for a particular crash. This will "override" the preprinted serial number in the lower right corner of each form.

DO NOT MAKE ANY MARKS ON, OR CROSSOUT THE PREPRINTED SERIAL NUMBER OR THE BUBBLED LITHO CODE (See Section 96, page 61).

Example: You are reporting a five-vehicle crash:

- **Units 1 and 2** are reported on Form 1811700. This will become "Page 1 of 3" in the upper right corner of the front page of the report.
- **Units 3 and 4** are reported on Form 1811701; however, on that form enter "1811700" in the Serial Override Number box. This form is now marked "Page 2 of 3" on the front page of the report.
- **Unit 5** will be reported on form 1811702; and "1811700" is also entered in the Serial Override Number box of this form. This form becomes "Page 3 of 3."
- All three forms are now considered UD-10 Traffic Crash Form 1811700.

Example: Two commercial vehicles collide. Since each form provides space to record only one commercial vehicle driver and one commercial vehicle, you will **need** to use two UD-10 forms for this crash. The preprinted serial number of the first form will be entered in the "override" block of the second form (and all subsequent forms used to report this crash).

In the upper right hand corner of the UD-10, enter "Page 1 of 2" on the first form, and "Page 2 of 2" on the other form.

71. ACTION PRIOR (Mark only one - See page 51)

72. SEQUENCE OF EVENTS (See page 52)

◀ Unit Reported on Front									
Action Prior		Sequence of Events							
		First		Second		Third		Fourth	
0	0	0	0	0	0	0	0	0	0
1	1	1	1	1	1	1	1	1	1
2	2	2	2	2	2	2	2	2	2
3	3	3	3	3	3	3	3	3	3
	4	4	4	4	4	4	4	4	4
	5		5		5		5		5
	6		6		6		6		6
	7		7		7		7		7
	8		8		8		8		8
	9		9		9		9		9
Most Harmful:		M		M		M		M	

"Action Prior" records what occurred immediately prior to the crash. "Sequence of Events" records, step-by-step, what happened during the crash. Up to four "Sequence of Events" may be recorded. The codes in "Action Prior" and "Sequence of Events" should reveal, from left to right, the events immediately prior to and during the crash. Complete a separate "Action Prior" and "Sequence of Events" box for each unit (motor vehicle, bicyclist, pedestrian, engineer).

Begin by completing the "Action Prior" box. What was the driver doing immediately before impact? "Action Prior" sets the stage for the initial impact. Next, record the initial impact action (you may also select a non-collision event, if applicable) in the "First Event" box. Use the "Second Event" to record what happened next up to four events. If more than four occurred, record those which, in your opinion, were most significant.

Finally, which of these events was, in your opinion, most harmful to a human being? Fill in the "M" bubble under this event. **Mark only one.**

Example: A driver tried to avoid an object in the road (18 - "Action Prior"). The car hit the curb (34-first event), rolled over (06-second event), and caught fire (08-third event). The third event was the most harmful, so fill in the "M" bubble under this event.

71. ACTION PRIOR: (Mark only one)

Action Prior
01 02
03 04
05 06
07 08
09 10
11 12
13 14
15 16
17 18
19 20
21 22
23 24
25 26
27 28
29 30
31 32
33 34
35 36
37 38
39 40
41 42
43 44
45 46
47 48
49 50
51 52
53 54
55 56
57 58
59 60
61 62
63 64
65 66
67 68
69 70
71 72
73 74
75 76
77 78
79 80
81 82
83 84
85 86
87 88
89 90
91 92
93 94
95 96
97 98
99 100

Choose the **one** option that best describes the action of this unit just prior to the first harmful event.

Driver Action (01 thru 37)

01	Going straight ahead	14	Entering roadway
02	Turning left	15	Leaving roadway
03	Turning right	16	Making U-turn
04	Stopped on roadway	17	Overtaking or passing
05	Involved in prior crash at same location	18	Avoiding object
06	Changing lanes	19	Avoiding pedestrian
07	Backing	20	Avoiding vehicle (front/back)
08	Slowing/stopping on roadway	21	Avoiding vehicle (angle)
09	Slowing/stopping other area	22	Driverless moving
10	Starting up on roadway	23	Parked
11	Starting up other area	35	Other
12	Entering parking	36	Unknown
13	Leaving parking	37	Avoiding animal

Pedestrian Action (24 thru 36)

24	Crossing at intersection	31	Other working in roadway
25	Crossing not at intersection	32	Playing in roadway
26	Getting on/off vehicle	33	In roadway other reason
27	In roadway with traffic	34	Not in roadway
28	In roadway against traffic	35	Other
29	Standing/lying in roadway	36	Unknown
30	Pushing/working on vehicle		

Example: In the sample UD-10 Traffic Crash Report (Appendix A, page67): Vehicle 1 was engaged in making a left turn just prior to impact occurring, thus **Option "02"** - Turning Left is marked. Vehicle 2 was being driven straight ahead at impact, therefore **Option "1"** - Going Straight Ahead is marked.

72. SEQUENCE OF EVENTS/MOST HARMFUL EVENT:

Sequence of Events							
First		Second		Third		Fourth	
0	0	0	0	0	0	0	0
1	1	1	1	1	1	1	1
2	2	2	2	2	2	2	2
3	3	3	3	3	3	3	3
4	4	4	4	4	4	4	4
5		5		5		5	
6		6		6		6	
7		7		7		7	
8		8		8		8	
9		9		9		9	
Most Harmful: (M)		(M)		(M)		(M)	

A. SEQUENCE OF EVENTS:

Non-Collision (01 thru 14)

- | | |
|----------------------------|---------------------------------|
| 01 Loss of control | 08 Fire/explosion |
| 02 Cross centerline/median | 09 Immersion |
| 03 Ran off road-left | 10 Jackknife |
| 04 Ran off road-right | 11 Downhill runaway |
| 05 Re-enter roadway | 12 Cargo loss/shift |
| 06 Overturn | 13 Individual fell from vehicle |
| 07 Separation of units | 14 Other non-collision |

Collision With Non-Fixed Objects (15 thru 21)

- | | |
|--------------------------------|----------------------------|
| 15 Pedestrian | 19 Railroad train/engineer |
| 16 Pedalcycle | 20 Animal |
| 17 Motor vehicle in transport* | 21 Other non-fixed object |
| 18 Parked motor vehicle** | |

* In transport means a motor vehicle in motion, or on a roadway illegally parked.
** Motor vehicle parked legally.

Collision With Fixed Objects (22 thru 45)


- | | |
|------------------------------|--------------------------------------|
| 22 Bridge/pier/abutment | 34 Curb |
| 23 Bridge parapet end | 35 Ditch |
| 24 Bridge rail | 36 Embankment |
| 25 Guardrail face | 37 Fence |
| 26 Guardrail end | 38 Mailbox |
| 27 Median barrier | 39 Tree |
| 28 Highway traffic sign post | 40 Rail crossing signal |
| 29 Highway signal post | 41 Building |
| 30 Luminary/light support | 42 Traffic island |
| 31 Utility pole | 43 Fire hydrant |
| 32 Other pole | 44 Impact attenuator (crash cushion) |
| 33 Culvert | 45 Other fixed object |

B. MOST HARMFUL:

Most Harmful is the incident which caused the most injury to a human being. **If no injury,** event which caused the most property damage.

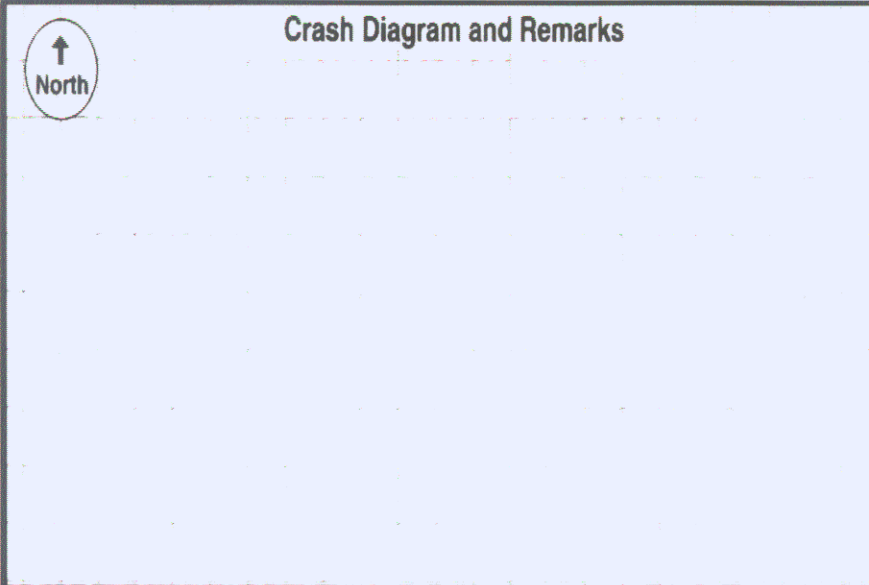
73. CRASH DIAGRAM AND REMARKS: (Required for FataIs)

Use this section to diagram the event and add any necessary remarks to explain what occurred. **The Fatality Analysis Reporting System (FARS) requires this information.** See sample diagram in Appendix A, page 68.



North

Crash Diagram and Remarks



74. INVESTIGATED AT SCENE:

Investigated
at Scene

☐ Y ☐ N

Mark the "Y" bubble if the crash was investigated at the scene. Otherwise, mark the "N" bubble.

75. REPORTED DATE/TIME:

Reported Date/Time

Enter the date (month, day, and year) and military time that this crash **was reported to your department**.

76. PHOTOS BY:

Photos By

Enter the photographer's initials, name, badge number or other identifying data.

77. INVESTIGATOR NAME(S)/BADGE NUMBER(S): (Please print)

Investigator Name(s) & Badge # (Print Only)

Please print the name(s) and badge number(s) of the investigating officer(s).

TRUCK/BUS INFORMATION

FOR ADDITIONAL INFORMATION IN FILLING OUT THE TRUCK PORTION, ASSISTANCE MAY BE AVAILABLE BY CONTACTING THE MSP, MOTOR CARRIER DIVISION AT: (517) 336-6195

Definition of Truck/Bus:

1. Any truck or truck tractor that has at least two axles and six tires on the power unit, including pickup trucks.
2. Any vehicle that displays a hazardous material placard, **automobiles and vans included.**
3. Any bus designed to transport 16 or more passengers, including the driver.
4. Any yellow and black school bus.

78. UNIT NUMBER:

Unit No. ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨

Mark the unit number that corresponds to the unit number you assigned the truck or bus in Section 30, page 30.

A truck or bus may be reported in any unit area on the UD-10. If the crash involves more than one truck or bus, they must have different unit numbers. However, **only one truck or bus may be reported per form.**

79. CARRIER NAME:

Carrier Name

List **one** of the following in the "Carrier Name" section:

1. The carrier is the person, agency, or corporation that controls the movement of the vehicle for transport of the load. The carrier's name shall be obtained from one of the following in this order of preference: **(Note: The carrier name can be different than the actual owner of the truck.)**
 - a. Shipping papers and bills of lading (Figure 5, page 62)
 - b. Side of the power unit (permanently or temporarily displayed) (Figure 6, page 62)
 - c. Driver's daily log (Figure 7, page 62)
 - d. From the driver

2. For government owned and operated vehicles, either federal, state or local agencies, list the government entity as displayed on the vehicle, i.e., Grand Ledge Public Schools, Road Commission for Oakland County, U.S. Army, etc. If an address is given on the vehicle or the registration, list it in the address section.
3. For privately owned non-commercial vehicles, such as a six-wheel pickup or small truck, list the owner as it is displayed on the vehicle registration.

NOTE: It is very important that the carrier name be listed exactly as it appears on the documents used to identify that carrier. Do not abbreviate the name in any way except for the abbreviations which appear on the documents.

80. CARRIER ADDRESS:

Address		
City	State	Zip

Enter the address of the carrier, company, agency or individual listed in "Carrier Name" section.

NOTE: Be sure to list the zip code. List all nine-digit extended zip codes when they are available.

81. CARRIER SOURCE: (Mark only one)

Carrier Source	
<input type="radio"/> Papers	<input type="radio"/> Log Book
<input type="radio"/> Vehicle	<input type="radio"/> Driver

Mark the source used to obtain the carrier name. (The four sources are discussed in "Carrier Name" Section 79, page 54).

82. ICCMC/USDOT/MPSC:

ICCMC
USDOT
MPSC

There are three types of carrier numbers that may be found on trucks and buses. Carrier licensing numbers are found on the power unit. All Interstate Commerce Commission Motor Carrier (ICCMC), United States Department of Transportation (USDOT) and Michigan Public Service Commission (MPSC) numbers shall be listed on the report, if such information is available.

NOTE: Private intrastate carriers (operating in Michigan only) are not required to display a carrier number, but they must display the company name and city location on the vehicle. See Figure 6 on page 62.

83. INTERSTATE/INTRASTATE:

<input type="radio"/> Interstate	<input type="radio"/> Intra (MI Only)
----------------------------------	---------------------------------------

If the power unit shows an Interstate Commerce Commission Motor Carrier (ICCMC) or United States Department of Transportation (USDOT) number, mark the **"Interstate"** bubble.

NOTE: For all privately owned (non-commercial) and state and local government owned vehicles, mark "Intrastate (Michigan only)."

84. GROSS VEHICLE WEIGHT RATING (GVWR):

GVWR

Enter the "GVWR" for the vehicle. This information can be taken from the manufacturer's identification plate or sticker which is normally located in the driver's door area or within the cab.

If you cannot find the "GVWR" plate or sticker on the power unit, enter the weight listed on the registration. If no weight appears on the registration, leave this box blank.

85. DRIVER'S CDL TYPE:

Driver's CDL Type	
<input type="radio"/> A	<input type="radio"/> H
<input type="radio"/> B	<input type="radio"/> N
<input type="radio"/> C	<input type="radio"/> P
	<input type="radio"/> T
<input type="radio"/> None	<input type="radio"/> X

For commercial drivers, mark all code letters as displayed in the "C.D.L. Type" box on the driver license. **(See page 65 for examples)**

GROUP
"A" "B" "C"

with

ENDORSEMENTS
"H" "N" "P" "T" "X"

NOTE: For further information regarding CDL requirements for commercial vehicle operation, see the "Vehicle Type" section in these instructions (Section 89, page 58).

86. MEDICAL CARD:

Medical Card	
<input type="radio"/> Y	<input type="radio"/> N

Drivers of trucks with a gross vehicle weight greater than 10,001 pounds (4,537 kilograms) **actual weight, or GVWR**, or interstate commercial buses **designed** for carrying 16 or more passengers including the driver, or any vehicle requiring placards for hazardous materials, **must** be medically qualified and carry a medical examiners certificate (Appendix A, Figure 12, page 65). Some intrastate drivers who have a long continuous service with a company may have qualified for the grandfather medical waiver and will carry a certificate stating so. A very limited number of drivers may carry a medical waiver certificate for a physical disability.

Fill in the "Yes" bubble if the driver has a medical card, grandfather card, or medical waiver certificate.

83. INTERSTATE/INTRASTATE:

<input type="radio"/> Interstate	<input type="radio"/> Intra (MI Only)
----------------------------------	---------------------------------------

If the power unit shows an Interstate Commerce Commission Motor Carrier (ICCMC) or United States Department of Transportation (USDOT) number, mark the "Interstate" bubble.

NOTE: For all privately owned (non-commercial) and state and local government owned vehicles, mark "Intrastate (Michigan only)."

84. GROSS VEHICLE WEIGHT RATING (GVWR):

GVWR

Enter the "GVWR" for the vehicle. This information can be taken from the manufacturer's identification plate or sticker which is normally located in the driver's door area or within the cab.

If you cannot find the "GVWR" plate or sticker on the power unit, enter the weight listed on the registration. If no weight appears on the registration, leave this box blank.

85. DRIVER'S CDL TYPE:

Driver's CDL Type	
<input type="radio"/> A	<input type="radio"/> H
<input type="radio"/> B	<input type="radio"/> N
<input type="radio"/> C	<input type="radio"/> P
	<input type="radio"/> T
<input type="radio"/> None	<input type="radio"/> X

For commercial drivers, mark all code letters as displayed in the "C.D.L. Type" box on the driver license. (See page 65 for examples)

GROUP
"A" "B" "C"

with

ENDORSEMENTS
"H" "N" "P" "T" "X"

NOTE: For further information regarding CDL requirements for commercial vehicle operation, see the "Vehicle Type" section in these instructions (Section 89, page 58).

86. MEDICAL CARD:

Medical Card	
<input type="radio"/> Y	<input type="radio"/> N

Drivers of trucks with a gross vehicle weight greater than 10,001 pounds (4,537 kilograms) **actual weight, or GVWR**, or interstate commercial buses **designed** for carrying 16 or more passengers including the driver, or any vehicle requiring placards for hazardous materials, **must** be medically qualified and carry a medical examiners certificate (Appendix A, Figure 12, page 65). Some intrastate drivers who have a long continuous service with a company may have qualified for the grandfather medical waiver and will carry a certificate stating so. A very limited number of drivers may carry a medical waiver certificate for a physical disability.

Fill in the "Yes" bubble if the driver has a medical card, grandfather card, or medical waiver certificate.

87. CDL RESTRICTIONS:

CDL Restrictions

- ☐ 28 ☐ 35
☐ 29 ☐ 36
☐ 30

These restrictions are for Michigan licensed drivers only. A sticker with all restrictions is placed on the back of the license and applicable restrictions are circled in red. Mark all those CDL restrictions in the "C.D.L. Restrictions" box that are circled in red on the back of the driver license. **(See page 65 for examples)**

- 28 CDL Not Valid for Vehicle with Air Brakes
29 CDL P Endorsement Valid in Group B or C Vehicle Only
30 CDL P Endorsement Valid in Group C Vehicle Only
35 No Single Vehicle/Power Unit Over 26K GVWR
36 No GVWR Over 26K if Towed Vehicle Over 10K GVWR

88. CDL EXEMPT:

CDL Exempt

- ☐ Farm
☐ Other

If the driver is operating a commercial vehicle which requires a CDL but has no CDL, it **must** be determined if that driver is exempt from the CDL. That determination is made by the investigating officer and is based on the operation being performed. Exemptions are not listed on the driver license.

Exemptions are listed in Section 257.302 and 257.312e, subsections (4), (5), (6), (7) and (8) of the Michigan Vehicle Code (revised 1995). If the driver is "farm exempt," mark "Farm."

Exemptions:

- (1) **Farm, if the driver is "farm exempt".**

The "Other" three exemptions to the CDL requirements are:

- (2) **Qualified military drivers in military vehicles.**
(3) **Qualified firefighters operating authorized emergency vehicles.**
(4) **Persons operating a motor home or a vehicle used exclusively to transport personal possessions or family members for non-business purposes. If one of these exemptions applies, mark "Other."**

89. VEHICLE TYPE:

Vehicle Type	
<input type="radio"/> AA	<input type="radio"/> BB
<input type="radio"/> AH	<input type="radio"/> BH
<input type="radio"/> AN	<input type="radio"/> BN
<input type="radio"/> AP	<input type="radio"/> BP
<input type="radio"/> AT	<input type="radio"/> BX
<input type="radio"/> AX	<input type="radio"/> CH
<input type="radio"/> AY	<input type="radio"/> CP
<input type="radio"/> AZ	<input type="radio"/> CX
<input type="radio"/> AL	<input type="radio"/> Other

Group A: Any vehicle that is towing a vehicle or trailer that has a gross vehicle weight rating (GVWR) over 10,000 lbs.

Vehicle Two-position Codes		Operator CDL Endorsement Required	
AA =	Group A vehicle	A	
AH =	Group A vehicle, Hazardous	A	H
AN =	Group A vehicle, Tank	A	N
AP =	Group A vehicle, Passenger	A	P
AT =	Group A vehicle, Double/Triple	A	T
AX =	Group A vehicle, Tank & Hazardous	A	X
AY =	Group A vehicle, Tank & Double/Triple	A	NT
AZ =	Group A vehicle, Hazardous, Double/Triple	A	HT
AL =	Group A vehicle, Hazardous Tank, Double/Triple	A	TX

Group B: Any single vehicle (including buses) with a GVWR of 26,001 lbs. and greater, or a combination of vehicles with a combined GVWR over 26,000 lbs. when towing a trailer that has a GVWR of 10,000 lbs. or less.

Vehicle Two-position Codes		Operator CDL Endorsement Required	
BB =	Group B vehicle	B	
BH =	Group B vehicle, Hazardous	B	H
BN =	Group B vehicle, Tank	B	N
BP =	Group B vehicle, Passenger	B	P
BX =	Group B vehicle, Tank & Hazardous	B	X

Group C: Any single vehicle with a GVWR of less than 26,001 lbs. or a combination of vehicles having a combined GVWR under 26,001 lbs. when the vehicle is required to display placards for hazardous material or designed to carry 16 passengers (including driver). Group "C" is also any vehicle carrying 15 or fewer people (including driver) transporting children to or from school and home on a regular basis for compensation.

Vehicle Two-position Codes		Operator CDL Endorsement Required	
CH =	Group C vehicle, Hazardous	C	H
CP =	Group C vehicle, Passenger	C	P
CX =	Group C vehicle, Tank & Hazardous	C	X

90. TYPE AND AXLES PER UNIT:

Type & Axles Per Unit			
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
First	Second	Third	Fourth

Enter the total number of axles per unit. Starting with the left box, first enter the power unit and then each trailer or towed unit.

If the truck is a truck tractor (a vehicle designed only to tow other units and has no cargo body), **place a "T" in front of the number** of axles for the power unit.

If the trailer is a semi-trailer (designed so that part of the trailer load is carried on the towing unit), **place an "S" in front of the number** of axles in the appropriate box.

Example: A dump truck pulling a utility trailer with a bulldozer would be listed as **3-S2** (The "S2" designates a two-axle semi-trailer which places part of the trailer weight on the towing unit.)

Example: A truck tractor towing a van semi-trailer would be **T3-S2** (The "T3" designates a three-axle truck tractor and the "S2" designates a two-axle semi-trailer.)

Example: A truck tractor towing a gravel semi-trailer/trailer combination (doubles) would be listed as **T3-S3-5** (The "S3" designates a three-axle semi-trailer, and the "5" designates a five-axle full trailer which does not place any of the load on the towing unit except for the tongue weight.)

91. CARGO BODY TYPE:

Cargo Body Type	①	②	③	④	⑤	⑥	⑦	⑧
-----------------	---	---	---	---	---	---	---	---

Indicate body type of the truck being reported and select one of the following:

- | | |
|-----------------------|---------------------|
| 1. Van (enclosed box) | 5. Concrete mixer |
| 2. Cargo tank | 6. Auto transporter |
| 3. Flatbed/platform | 7. Garbage/refuse |
| 4. Dump | 8. Other/unknown |

Example: A dump truck towing a lowboy trailer with a dozer would be listed as a "Dump truck." However, a truck-tractor towing a lowboy semi-trailer with a dozer will be listed as a "Flatbed/platform" because the truck tractor has no cargo body.

"Van (enclosed box)" is meant to be used with the normal enclosed cargo box whether it be a semi-trailer or a straight truck body. This category was not meant for use with a bus.

"Cargo tank" means a completely enclosed tank type body designed to transport liquid, gaseous and flowable solid material (powder, granular, etc.).

"Auto transporter (semi-trailer)" is only used for semi-trailer auto transport vehicles. Straight trucks transporting vehicles will be listed under "Flatbed/platform," as appropriate.

There are several types of vehicles which best fit in the "Other" category. These include such vehicles as tow trucks, utility and line trucks, pole trailers and special use vehicles not otherwise listed. Buses, pickups and "bobtail" truck tractors (without a trailer) will also be listed under "Other."

92. HAZARDOUS MATERIAL:

Hazardous Material				
Placard	<input type="radio"/>	Y	<input type="radio"/>	N
Cargo Spill	<input type="radio"/>	Y	<input type="radio"/>	N

PLACARD:

If the vehicle had "hazardous material" placards displayed, fill in the bubble for "Yes;" if not, indicate "No." This does not include "Drive Safely" or other similarly worded placards.

SPILL:

Were hazardous materials spilled/released from the vehicle during the crash? Mark "Yes" or "No" as appropriate. Materials that spill but are contained within the vehicle and not released to the outside will not be considered as spilled/released for this report.

NOTE: Only the cargo is to be considered for this question. This does not include fuel from the vehicle fuel tanks or other hazardous material spilled from a fixed containment which was struck by any of the vehicles during the crash.

93. HAZARDOUS MATERIAL PLACARD IDENTIFICATION NUMBER:

ID #

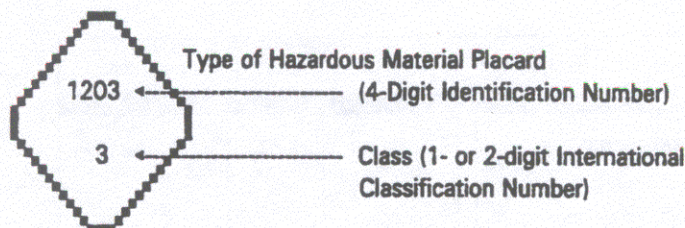
If a Hazardous Material Placard is displayed, mark the four-digit identification number that appears in the center of the diamond-shaped placard (or orange panel, whichever is applicable). If more than one placard appears on the panel, list only one.

94. CLASS: (International Classification)

Class #

Most Hazardous Material placards will display a single digit "International Classification" number in the bottom corner. If a number is displayed, mark it in this section.

HAZARDOUS MATERIAL PLACARD



95. LOCAL FILING INFORMATION AREA:

--	--	--	--

This space is reserved for use by local departments. If you are instructed by your department to fill this out, do so. There is space for up to four entries along the right border on the front of the form for filing purposes. Data such as date, incident number and driver's name may be listed as determined by your department.

96. LITHO CODING: DO NOT CROSS OUT ANY BUBBLES IN THIS AREA, EVEN WHEN SUBMITTING A CORRECTED COPY, REPLACE OR DELETE.

Do Not Write or Mark in This Area



Each form will come with bubbles pre-marked in the in the Litho code section. Do not mark any additional bubbles or make any stray marks in this section.

97. DO NOT USE:

Do Not Use

This area is used only by the Criminal Justice Data Center to record a microfilm retrieval number when the form is received and microfilmed.

Figure 5

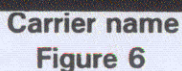


INVOICE NO.
65483

PAGE 1

NO CLAIMS FOR DEDUCTIONS ALLOWED UNLESS MADE IMMEDIATELY ON RECEIPT OF GOODS DO NOT DISPOSE OF DISPUTED STOCK WITHOUT OUR APPROVAL

ALL INVOICES NOT PAID BY DUE DATE ARE SUBJECT TO A SERVICE CHARGE OF 1½% (18% ANNUAL)
CUSTOMER COPY



Driver's Daily Log
Figure 7



Figure 8

Interstate Commerce
Commission Motor Carrier
(ICCMC) Number for
Regulated
Interstate Carrier

Figure 9

Michigan Public Service
Commission (MPSC)
Carrier Number
for Regulated
Intrastate Carrier

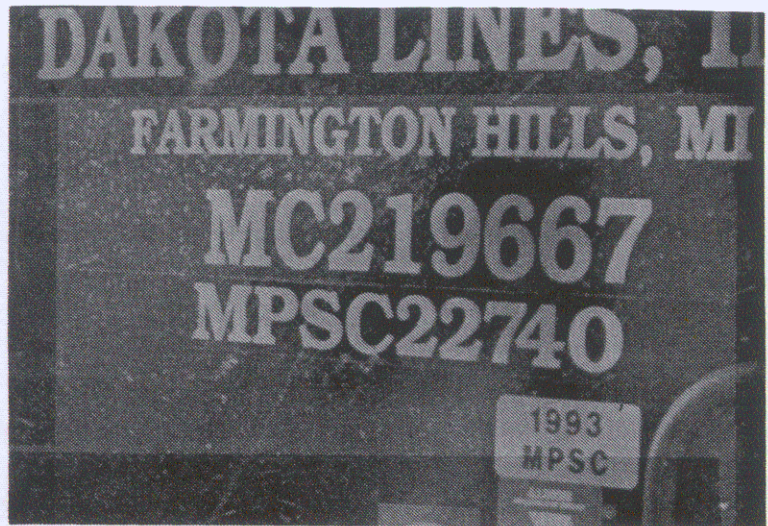
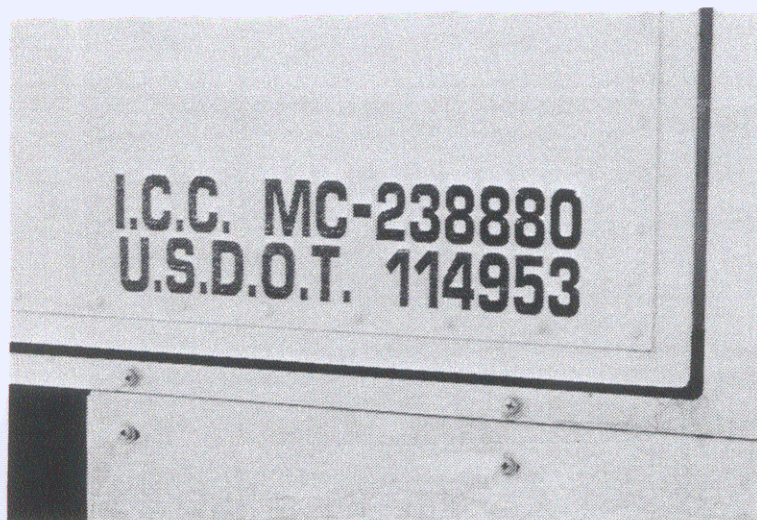


Figure 10

United States Department
of Transportation (USDOT)
Carrier Number for Private
Interstate Carrier



MICHIGAN REGISTRATION

CANDICE S. MILLER
Secretary of State

Plate: 601AAA Expires: 06/01/99

ORIGINAL REGISTRATION

91 CHEVROLET 2 DOOR

Vehicle No.: 1GCCS19R3M123444

Fee Cat. or Wt.: 000010

A 000 123 111 400

County: IONIA

JOHN PAUL ANYONE

1234 ANY STREET

SOMEPLACE

MI 48000

License Fee: 57.00

031098 L3 J069 099 0001 57.00

TR-1L

MEDICAL EXAMINER'S CERTIFICATE

I certify that I have examined

(Driver's name (print))

in accordance with the Federal Motor Carrier Safety Regulations (49 CFR §391.41 through §391.49) and with knowledge of his/her duties, I find him/her qualified under the regulations. Expiration date of this certificate: / /

Qualified only when wearing: ☐ Corrective lenses ☐ Hearing aid. ☐ Medically unqualified unless accompanied by a waiver.

☐ Medically unqualified unless driving within an exempt intracity zone.

☐ Qualified by operation of 49 CFR 391.64.

A complete examination form for this person is on file in my office.

()
Area Code & Telephone Number

(Medical Examiner (Print Name and Title))

(Signature of Medical Examiner)

(Title) (License or Certification No.) (State in Which Licensed)

(Signature of driver)

(Address of driver)

Michigan Trucking Association®1997 Form C0750
To reorder call (517) 321-1951

Registration
Figure 11

Medical Examiner's Certification
Figure 12

MICHIGAN APPORTIONED REGISTRATION CAB CARD

Owner (Lessor)				
Unit Number	Year	Make	Type	Fuel
A2	1988	FORD	TR	L
Vehicle Identification Number			Gross Vehicle Weight	
1FUYPYB8R1891345			36000	
Unladen Weight	County Code	Tab Number		
12000	33			
MI Wgt. Fee	Misc. Fee	MI Total Fee	Date Registered	
13.11	.00	13.11	02/03/98	

Account Number

Operator (Lessee) 99999-03-000

*COVERS TRUCKING

7064 CROWNER DRIVE

LANSING

MI 48909

1998-104

STATE OF MICHIGAN — DEPARTMENT OF STATE

Authority granted under Act No. 124 (PA 1960)

No jurisdictions are to be listed after the row of asterisks or card is invalid. This card must be carried in the vehicle to which it is issued or be subject to confiscation. Copies are not valid.

The vehicle described has been proportionally registered between the State of Michigan and the jurisdictions shown below.

Plate Number

AB 016341	AL 036000	AR 036000	AZ 036000
BC 016341	CA 00AL	CO 036000	CT 036000
DC 036000	DE 036000	FL 036000	GA 036000
IA 036000	ID 036000	IL 036000	IN 036000
KS 036000	KY 036000	LA 036000	MA 036000
MD 036000	ME 036000	MI 036000	MN 036000
MO 036000	MS 036000	MT 036000	NC 036000
ND 036000	NE 036000	NH 036000	NJ 036000
NM 036000	NV 036000	NY 036000	OH 036000
OK 036000	OR 036000	PA 036000	RI 036000
SC 036000	SD 036000	SK 016341	TN 036000
TX 036000	UT 036000	VA 036000	VT 036000
WA 036000	WI 036000	WV 036000	WY 036000
** *****	** *****	** *****	** *****
** *****	** *****	** *****	** *****
** *****	** *****	** *****	** *****

EXPIRES 12/31/1998

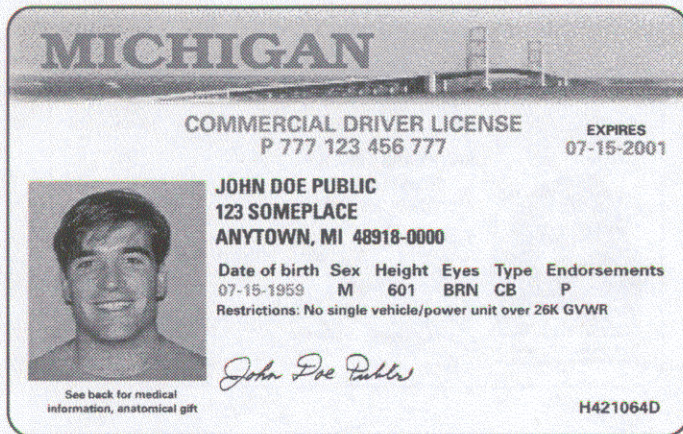
1998

IRP-2 (8/89)

US WCTS IN LBS. CAN WCTS IN KGS

Apportioned Registration CAB Card
Figure 13

LICENSE AND "CDL" TYPES



License Types:

O = Operator
C = Chauffeur
PO = Probationary Operator
MO = Moped Operator

CDL Restriction Sticker:

(Placed on back of license with CDL restrictions circled)

CDL RESTRICTION(S) CIRCLED

28 CDL Not Valid for Veh with Air Brakes
29 CDL P Endorsement Valid in Group B or C Veh Only
30 CDL P Endorsement Valid in Group C Veh only
35 No Single Veh/Power Unit Over 26K GVWR
36 No GCWR Over 26K if Towed Veh Over 10K GVWR

GROUP VEHICLE DESIGNATORS:

Group "A" Designation:

- A vehicle towing another vehicle or trailer with a G.V.W.R. of OVER 10,000 lbs. Regardless of the G.V.W.R. of the towing vehicle.
- Group "A" designation allows you to operate both group "B" and "C" vehicles as well.

Group "B" Designation:

- A single vehicle having a G.V.W.R. over 26,001 lbs.
- A combination of vehicles having a combined G.V.W.R. over 26,000 lbs. When the towed vehicle is LESS than 10,000 lbs.
- Group "B" designation allows you to operate group "C" vehicles as well.

Group "C" Designation:

- Vehicles designed to carry 16 or more passengers, including the driver.
- Small vehicles (including passenger and pickups) when carrying hazardous materials in amounts that would require placarding of the vehicle.

ENDORSEMENTS:

Air Brakes - If the vehicle is equipped with air brakes, you will need to take the skills and knowledge parts of the CDL test that refers to air brakes. There is no actual endorsement added to the license; however, if you DO NOT pass that portion of the test, the license will be printed with 'MAY NOT OPERATE A VEHICLE EQUIPPED WITH AIR BRAKES.'

"T" - Double and Triple trailers (for Group "A" only). Triple trailers are not permitted in the state of Michigan, but are permitted in certain other jurisdictions.

"N" - To haul liquids or liquefied gases in bulk in any tank (permanent OR portable) rated at 1,000 gal. or more. Is needed for both Group "A" and "B."

"H" - To carry any hazardous materials in amounts requiring placarding (includes small trucks, pickup trucks and passenger vehicles). Is needed for ALL Groups.

"X" - Tanker(s) carrying hazardous materials (may take the place of "N" and "H").

"P" - Passenger endorsement. If the vehicle is DESIGNED to carry 16 or more people including the driver. Needed for Groups "A," "B," and "C." ("A" is needed when a Bus is pulling a trailer over 10,000 lbs. GVWR)

"F" - Farm Equipment. A person operating a combination of vehicles having a G.V.W.R. of 26,000 lbs. or more on the power unit (truck or road tractor), is required to have the "F" endorsement if the following conditions are met: (1) Controlled by and operated by the farmer or a member of his family or an employee of the farmer; (2) Vehicle is used to transport agricultural products, farm machinery, farm supplies, or a combination of these items, to or from a farm; (3) The vehicle is *not used* in the operation of a common, limited common, or contract motor carrier, or (4) the vehicle is operated within 150 air miles of the farm.

SAMPLE OF NEW MICHIGAN
DRIVER LICENSE/ID FORMATS

MICHIGAN

OPERATOR LICENSE
P 999 123 456 789

EXPIRES
09-10-2002

JOHN DOE PUBLIC
123 SOMEPLACE
ANYTOWN, MI 48918-0000

Date of birth Sex Height Eyes Type Endorsements
09-10-1948 M 601 BRN O CY

Restrictions: Corrective Lens

John Doe Public

See back for medical information, anatomical gift

H3012647

MICHIGAN

OPERATOR LICENSE
D 123 456 789 999

EXPIRES
10-15-1999

Under 21
Until 10-15-1999

ANNE CARR DRIVER
123 SOMEPLACE
ANYTOWN, MI 48918-0000

Date of birth Sex Height Eyes Type Endorsements
10-15-1978 F 504 BRN O NONE

Restrictions: NONE

Anne Carr Driver

See back for medical information, anatomical gift

F3012637

MICHIGAN

CHAUFFEUR LICENSE
D 888 123 456 777

EXPIRES
05-20-2002

ANNE CARR DRIVER
123 SOMEPLACE
ANYTOWN, MI 48918-0000

Date of birth Sex Height Eyes Type Endorsements
05-20-1972 F 510 BLU C NONE

Restrictions: NONE

Anne Carr Driver

See back for medical information, anatomical gift

J3033057

MICHIGAN

COMMERCIAL DRIVER LICENSE
P 777 123 456 777

EXPIRES
07-15-2001

JOHN DOE PUBLIC
123 SOMEPLACE
ANYTOWN, MI 48918-0000

Date of birth Sex Height Eyes Type Endorsements
07-15-1959 M 601 BRN CB P

Restrictions: No single vehicle/power unit over 26K GVWR

John Doe Public

See back for medical information, anatomical gift

H421064D

MICHIGAN

GRADUATED DRIVER LICENSE
P 999 777 888 222

EXPIRES
11-02-2002

Under 21
Until 11-02-2002

JOHN DOE PUBLIC
123 SOMEPLACE
ANYTOWN, MI 48918-0000

Date of birth Sex Height Eyes Type Endorsements
11-02-1981 M 601 BRN O2 NONE

Restrictions: Corrective Lens

John Doe Public

See back for medical information, anatomical gift

E2012747

MICHIGAN

MOPED LICENSE
D 888 111 222 333

EXPIRES
01-28-1999

Under 21
Until 01-28-1999

ANNE CARR DRIVER
123 SOMEPLACE
ANYTOWN, MI 48918-0000

Date of birth Sex Height Eyes Type Endorsements
01-28-1978 F 502 BLU M NONE

Restrictions: NONE

Anne Carr Driver

See back for medical information, anatomical gift

F1281247

MICHIGAN

IDENTIFICATION CARD
P 777 123 456 7

EXPIRES
12-18-2002

JOHN DOE PUBLIC
123 SOMEPLACE
ANYTOWN, MI 48918-0000


Date of birth Sex Height Eyes Weight
12-18-1948 M 601 BRN 180

John Doe Public

See back for medical information, anatomical gift

J1323097

Information contained in bar code and magnetic stripe is limited to date of birth, license/ID number and expiration date.



I would like to make an anatomical gift effective on my death:

☐ all organs ☐ all tissues (bone, eyes, other)

☐ specific organs: _____

Signature: _____

Witness: _____

Emergency contact: _____





Telephone: () _____

Medical Alert

USE BALL POINT PEN ONLY

This space available for change of address label

SAMPLE OF MICHIGAN DRIVER LICENSE/ID FORMATS

DRIVER LICENSE		MICHIGAN		BUCKLE UP	
IDENTIFICATION NUMBER: A 111 255 248 371		EXPIRATION DATE: 10/5/95		ENDORSEMENT: 02	
NAME: MARY ANYONE					
UNDER 21					
		MICHIGAN IDENTIFICATION CARD IDENTIFICATION NUMBER: A 111 210 072 4 EXPIRATION DATE: 10/22/94 NAME: JOE SAMPLE UNDER 21 STREET: 521 ANY STREET CITY: LANSING STATE: MI DATE OF BIRTH: 12 25 77 SEX: M IF YOU MOVE YOU MUST CHANGE YOUR ADDRESS AT A DRIVER LICENSE OFFICE X <i>Joe Sample</i> SIGNATURE SEX: M HEIGHT: 5 6 WEIGHT: 175 EYES: BRN HAIR: BRN SKIN: F 48718			
					
DRIVER LICENSE		MICHIGAN		BUCKLE UP	
IDENTIFICATION NUMBER: D 111 044 108 450		EXPIRATION DATE: 10/5/12		ENDORSEMENT: 01	
NAME: ANNE CARR DRIVER					
SAMPLE					
		IDENTIFICATION NUMBER: A 111 210 072 4 EXPIRATION DATE: 10/22/94 NAME: JOE SAMPLE UNDER 21 STREET: 521 ANY STREET CITY: LANSING STATE: MI DATE OF BIRTH: 12 25 77 SEX: M IF YOU MOVE YOU MUST CHANGE YOUR ADDRESS AT A DRIVER LICENSE OFFICE X <i>Joe Sample</i> SIGNATURE SEX: M HEIGHT: 5 6 WEIGHT: 175 EYES: BRN HAIR: BRN SKIN: F 48718			
					
SEE REVERSE SIDE FOR WEARABLE OR ORNAMENTAL GIFT <input type="checkbox"/> CANDICE S. MILLER Secretary of State					

Authority: 1949 PA 300, Sec. 257.622
Compliance: Required
Penalty: \$100 and/or 90 days

Do Not Use

Page 1 Of 1 UD-10 (1/99)

ORI: MI-3336400

STATE OF MICHIGAN

Traffic Crash Report

Incident # 99-2000

File Class 9300-1

Incident Disposition ☐ Open ☒ Closed
Reviewer JEB

Crash Date			Crash Time		
Month	Day	Year	Hour	Minute	Second
03	22	1999	02	45	

Department Name EAST LANSING PD

No. of Units	Crash Type	Special Circumstances	Weather (Mark Only One)	Light (Mark Only One)	Special Checks
<input type="radio"/> 1	<input type="radio"/> 1 Single Motor Vehicle	<input type="radio"/> None	<input type="radio"/> Clear	<input type="radio"/> 1 Daylight	<input type="radio"/> Fatal (Report All)
<input type="radio"/> 2	<input type="radio"/> 2 Head On	<input type="radio"/> 2 Deer	<input type="radio"/> 2 Cloudy	<input type="radio"/> 2 Dawn	<input type="radio"/> Corrected Copy
<input type="radio"/> 3	<input type="radio"/> 3 Head On-Left Turn	<input type="radio"/> 3 School Bus	<input type="radio"/> 3 Fog/Smoke	<input type="radio"/> 3 Dusk	<input type="radio"/> Replace (Entire Report)
<input type="radio"/> 4	<input type="radio"/> 4 Angle	<input type="radio"/> 4 Hit and Run	<input type="radio"/> 4 Rain	<input type="radio"/> 4 Dark-Lighted	<input type="radio"/> Delete (Entire Report)
<input type="radio"/> 5	<input type="radio"/> 5 Rear End	<input type="radio"/> 5 Fleeing Police	<input type="radio"/> 5 Snow/Blowing Snow	<input type="radio"/> 5 Dark-Unlighted	<input type="radio"/> Non-Traffic Area
<input type="radio"/> 6	<input type="radio"/> 6 Rear End-Left Turn		<input type="radio"/> 6 Severe Wind	<input type="radio"/> 6 Other/Unknown	<input type="radio"/> ORV/Snowmobile
<input type="radio"/> 7	<input type="radio"/> 7 Rear End-Right Turn		<input type="radio"/> 7 Sleet/Hail		
<input type="radio"/> 8	<input type="radio"/> 8 Sideswipe-Same		<input type="radio"/> 8 Other/Unknown		
<input type="radio"/> 9	<input type="radio"/> 9 Sideswipe-Opposite				
<input type="radio"/> 10	<input type="radio"/> 10 Other/Unknown				

County	City/Twp	Traffic Control	Construction Zone (if applicable)	Activity	Relation to Roadway	Area	Road Condition	Total Lanes	Speed Limit
33	80	<input type="radio"/> Signal	<input type="radio"/> Const./Maint.	<input type="radio"/> On Road	<input type="radio"/> On Road	<input type="radio"/> Dry	<input type="radio"/> 0	<input type="radio"/> 0	<input type="radio"/> 0
		<input type="radio"/> Stop Sign	<input type="radio"/> Lane Closed	<input type="radio"/> Off Road	<input type="radio"/> Median	<input type="radio"/> 1 Wet	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1
		<input type="radio"/> Yield Sign	<input type="radio"/> Utility	<input type="radio"/> None	<input type="radio"/> Shoulder	<input type="radio"/> 2 Icy	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2
		<input type="radio"/> None of These			<input type="radio"/> Outside of Shoulder/Curb	<input type="radio"/> 3 Snowy	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3
		Road Name KALAMAZOO ST.			<input type="radio"/> Gore	<input type="radio"/> 4 Muddy	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4
		Distance 20 FT			<input type="radio"/> Other/Unknown	<input type="radio"/> 5 Slushy	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5
		Intersecting Road HARRISON RD.				<input type="radio"/> 6 Debris	<input type="radio"/> 6	<input type="radio"/> 6	<input type="radio"/> 6
						<input type="radio"/> 7 Other/Unknown	<input type="radio"/> 7	<input type="radio"/> 7	<input type="radio"/> 7
						<input type="radio"/> 8	<input type="radio"/> 8	<input type="radio"/> 8	<input type="radio"/> 8
						<input type="radio"/> 9	<input type="radio"/> 9	<input type="radio"/> 9	<input type="radio"/> 9

Unit Number	State	Driver License Number	Date of Birth	License Type	Sex	Hazard Action			
PAC	071	326	277	684	02141973	0			
1	6	First Name	Middle	Last	Position	Restraint	Ambulance/Hospital	Citation Issued	Total Occup
2	7	JOE NMN COLLEGE			1	04	ELFD / SPARROW	<input type="radio"/> Hazardous	<input type="radio"/> 1
3	8	1126 MEMORY LANE (814) 628-1168			<input type="radio"/> Ejected	<input type="radio"/> Trapped	<input type="radio"/> Yes	<input type="radio"/> Other	<input type="radio"/> 2
4	9	City	State	Zip	<input type="radio"/> B	<input type="radio"/> Airbag Deployed	<input type="radio"/> 1 Yes	<input type="radio"/> 2 No	<input type="radio"/> 3
5		SINNAMAHONING	PA	15861	<input type="radio"/> C	<input type="radio"/> Not Equipped	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 4
		Driver Condition	Driver Condition			Driver Condition			<input type="radio"/> 5
		<input type="radio"/> Refused	<input type="radio"/> Not offered			<input type="radio"/> Not offered			<input type="radio"/> 6
		Interlock	<input type="radio"/> Yes			<input type="radio"/> No			<input type="radio"/> 7
		Alcohol	<input type="radio"/> Yes			<input type="radio"/> No			<input type="radio"/> 8
		Drugs	<input type="radio"/> Yes			<input type="radio"/> No			<input type="radio"/> 9

Vehicle Registration	State	VIN	Vehicle Description (year, make, color)
MGZ1954	PA	1G45Z41J8M161245	91 RED S-10 BLAZER
Insurance	Towed To/By	Vehicle Direction	Special Vehicles
ERIE	ROUTS / POP'S	<input type="radio"/> North	<input type="radio"/> 1
Location of Greatest Damage	Vehicle Type	Vehicle Use	Vehicle Defect
<input type="radio"/> 2	<input type="radio"/> PA	<input type="radio"/> 2	<input type="radio"/> 1
First Impact	Extent of Vehicle Damage	Driveable	Private Trailer Type
2	<input type="radio"/> 1	<input type="radio"/> Yes	<input type="radio"/> 1
	<input type="radio"/> 2	<input type="radio"/> No	<input type="radio"/> 2
	<input type="radio"/> 3	<input type="radio"/> No	<input type="radio"/> 3
	<input type="radio"/> 4	<input type="radio"/> No	<input type="radio"/> 4
	<input type="radio"/> 5	<input type="radio"/> No	<input type="radio"/> 5
	<input type="radio"/> 6	<input type="radio"/> No	<input type="radio"/> 6
	<input type="radio"/> 7	<input type="radio"/> No	<input type="radio"/> 7
	<input type="radio"/> 8	<input type="radio"/> No	<input type="radio"/> 8
	<input type="radio"/> 9	<input type="radio"/> No	<input type="radio"/> 9

First Name	Middle	Last	Date of Birth	Sex	Ejected	
JOSEPHINE		COLLEGE	1126 MEMORY LN. SINNAMAHONING, PA 628-1168	<input type="radio"/> M	<input type="radio"/> Yes	
Street Address	Phone Number	Month	Day	Year	<input type="radio"/> F	<input type="radio"/> Trapped
City	State	Zip	Pos.	Rest.	Ambulance/Hospital	<input type="radio"/> K
First Name	Middle	Last	Date of Birth	Sex <td>Ejected</td>	Ejected	
TOM		IZZO	2600 FOREST TR. E. LANSING, MI	<input type="radio"/> M	<input type="radio"/> Yes	
Street Address	Phone Number	Month	Day	Year	<input type="radio"/> F	<input type="radio"/> Trapped
City	State	Zip	Pos.	Rest.	Ambulance/Hospital	<input type="radio"/> K

Owner	Witness	Name	Address	Phone Number	Age	Pos.	Rest.
<input type="radio"/> Owner	<input type="radio"/> Witness	JOSEPHINE COLLEGE	1126 MEMORY LN. SINNAMAHONING, PA	628-1168			
<input type="radio"/> Owner	<input type="radio"/> Witness	TOM IZZO	2600 FOREST TR. E. LANSING, MI	NONE			
Person Advised of Damaged Traffic Control	Date	Time	Name	Damaged Property	Public	Owner's Phone	
	N/A			NONE	<input type="radio"/> Y	N/A	

Do Not Write or Mark In This Area	UD-10 SERIAL NUMBER	Serial Override Number
<input type="radio"/>		

Do Not Write or Mark Below This Line

Do Not Write or Mark Below This Line

A OHSP ELOP.

-----FATAL TRAFFIC CRASH REPORT-----

AGENCY DATA--

RELATED UD-10 FORM NUMBER:

POLICE AGENCY:

COMPLAINT/INCIDENT NUMBER:

CRASH INFORMATION--

TYPE OF CRASH:

DATE OCCURRED:

TIME:

LOCATION:

STREET NAME:

NEAR INTERSECTION:

CITY:

COUNTY:

ALCOHOL/DRUGS:

TIME EMS DISPATCHED:

TIME EMS ARRIVED:

ROADWAY DATA--

CONCRETE: BLACKTOP:

GRAVEL:

DIRT: STRAIGHT:

CURVE:

HILLCREST: LEVEL:

GRADE:

VICTIM INFORMATION--

NAME:

DOB:

AGE:

SEX:

ADDRESS:

CITY:

ZIP:

POSITION:

DATE OF DEATH:

TIME:

RELATIVES NOTIFIED:

ALCOHOL/DRUG:

RESTRAINT:

AIRBAG:

VEHICLES INVOLVED YEAR/MAKE/MODEL ----

YEAR: MAKE: MODEL:

YEAR: MAKE: MODEL:

YEAR: MAKE: MODEL:

YEAR: MAKE: MODEL:

YEAR: MAKE: MODEL:

ADDITIONAL FATAL VICTIM INFORMATION--

NAME:

DOB:

AGE:

SEX:

ADDRESS:

CITY:

ZIP:

POSITION:

DATE OF DEATH:

TIME:

RELATIVES NOTIFIED:

ALCOHOL/DRUG:

RESTRAINT:

AIRBAG:

DEFINITIONS OF TERMS

Some definitions given are for purposes of UD-10 Traffic Crash Report completion **only** and should not be used for enforcement or prosecution purposes.

At-intersection crash

Traffic crash where the first harmful event occurs at the exact intersecting point of the centerlines of the two roadways. See Within-intersection crash.

Bicycle

"Bicycle" means a device propelled by human power upon which a person may ride, having either 2 or 3 wheels in a tandem or tricycle arrangement, all of which are over 14 inches in diameter. §257.4

Bridge abutment

Vertical support structure which retains the earth supporting the bridge ends. See Bridge pier.

Bridge parapet end

The end of a bridge or bridge rail (as opposed to the "facing" which is that portion of the bridge rail beyond its end).

Bridge pier

Freestanding column that supports the weight of a bridge. The column is not enclosed or backed by earth. See Bridge abutment.

Bus

Any passenger-carrying vehicle designed to transport 16 or more passengers, including the driver.

Crash

Unstabilized situation which includes at least one harmful event. Also, that occurrence in a sequence of events that usually produces injury, death or property damage.

"Crash cushion"

See Impact attenuator.

Culvert

Enclosed (covered) channel under a road or driveway to allow water to pass.

Elected gross weight

"Elected gross weight" means the empty weight of a vehicle or combination of vehicles, fully equipped for service, plus the weight of the maximum load which the owner has elected to carry on such vehicle or combination of vehicles. §257.13a

Farm tractor

"Farm tractor" means every motor vehicle designed and used primarily as a farm implement for drawing plows, mowing machines, and other implements of husbandry. §257.16

Fifth wheel travel trailer

A trailer designed for recreational use that is normally towed by a pickup truck. The fifth wheel hitch has an upper and lower coupling device; the lower half is mounted in the bed of the towing unit. The upper half consists of a plate and king pin which is attached to the towed vehicle (fifth wheel travel trailer). A fifth wheel travel trailer is the only type of travel trailer that meets the requirement for use as the first towed unit in recreational doubles.

Gore

An area of land where two roadways diverge or converge. The area is bounded on two sides by the edges of the roadways which join at the point of divergence or convergence. The direction of traffic must be the same on both sides of these roadways. The gore is considered to start or end at the point where the painted pavement edge lines of the two roadways diverge or converge.

Gross weight

"Gross weight" means the weight of a vehicle without load plus the weight of any load thereon. §257.19

Harmful event

An occurrence of injury or damage.

Highway or street

"Highway or street" means the entire width between the boundary lines of every way publicly maintained when any part thereof is open to the use of the public for purposes of vehicular travel. §257.20

Ignition Interlock Devices

Ignition Interlock device means an alcohol concentration measuring device that prevents a motor vehicle from being started at any time without first determining through a deep lung sample the operator's breath alcohol level. **Michigan Vehicle Code, Sec. 257.625L (6)**

Immersion

The act of plunging into a liquid (water).

Impact attenuator

A protective device that protects errant vehicles from impacting fixed-object hazards by (1) gradually decelerating the vehicle and (2) re-directing its path of travel away from the fixed object.

Implement of husbandry

"Implement of husbandry" means a vehicle which is either a farm tractor, a vehicle designed to be drawn by a farm tractor or an animal, a vehicle which directly harvests farm products, or a vehicle which directly applies fertilizer, spray, or seeds to a farm field. §257.21

Intersection

"Intersection" means: (a) The area embraced within the prolongation or connection of the lateral curb lines, or, if none, then the lateral boundary lines of the roadways of 2 highways which join one another at, or approximately at, right angles, or the area within which vehicles traveling upon different highways joining at any other angle may come in conflict.

(b) Where a highway includes 2 roadways 30 feet or more apart, then every crossing of each roadway of such divided highway by an intersecting highway shall be regarded as a separate intersection. In the event such intersecting highway also includes 2 roadways 30 feet or more apart, then every crossing of 2 roadways of such highways shall be regarded as a separate intersection. §257.22

Also: Area within the extended pavement lines at points where two highways join or cross (from Dictionary of Civil Engineering).

In transport

The term "in transport" denotes the state or condition of a vehicle which is in motion or within the portion of a way ordinarily used by similar vehicles. When applied to motor vehicles, "in transport" means in motion or on a roadway.

Inclusions:

- Motor vehicle in traffic on a highway
- Driverless motor vehicle in motion
- Motionless motor vehicle abandoned on a roadway
- Disabled motor vehicle on a roadway
- And others

A parked motor vehicle in roadway lanes used for travel during rush hours and parking during off-peak periods is in transport during periods when parking is forbidden.

Luminaire/light support

A complete lighting unit, consisting of lamp(s), support pole and wiring

Median

Distance or area between the inside left-hand pavement edges of a divided highway.

Moped

"Moped" means a 2- or 3-wheeled vehicle which is equipped with a motor that does not exceed 50 cubic centimeters piston displacement, produces 2.0 brake horsepower or less, and cannot propel the vehicle at a speed greater than 30 miles per hour on a level surface. The power drive system shall not require the operator to shift gears. §257.32b

Motorcycle

"Motorcycle" means every motor vehicle having a saddle or seat for the use of the rider and designed to travel on not more than 3 wheels in contact with the ground but excluding a tractor. §257.31

Motor home

"Motor home" means a motor vehicle constructed or altered to provide living quarters, including permanently installed cooking and sleeping facilities, and is used for recreation, camping, or other non-commercial use. §257.32a

Motor vehicle

"Motor vehicle" means every vehicle which is self-propelled and every vehicle which is propelled by electric power obtained from overhead trolley wires, but not operated upon rails. §257.33

Non-profit organization registration

A vehicle registration issued to certain non-profit organizations such as Civil Air Patrol, churches, and civic clubs. Sometimes referred to as a "Y-Plate." See MVC 257.224 for details.

Non-traffic area

An area not designed for purposes of thru vehicular travel. Generally, an area with roadways that are not part of the state, county, or local road system. Non-traffic areas include shopping center parking areas and service-access roads, parking ramps, parklands and school properties.

ORV

"ORV" or "vehicle" means a motor-driven off-road recreation vehicle capable of cross-country travel without benefit of a road or trail, on or immediately over land, snow, ice, marsh, swampland, or other natural terrain. It includes, but is not limited to a multitrack or multiwheel drive or low pressure tire vehicle, a motorcycle or related 2-wheel or 3-wheel vehicle, an amphibious machine, a ground effect air cushion vehicle, or other means of transportation deriving motive power from a source other than muscle or wind. "ORV" or "vehicle" does not include a registered snowmobile, a farm vehicle being used for farming, a vehicle used for military, fire, emergency, or law enforcement purposes, a construction or logging vehicle used in performance of its common function, or a registered aircraft. §257.1601

Parking

"Parking" means standing a vehicle, whether occupied or not, upon a highway, when not loading or unloading, except when making necessary repairs. §257.38

Pedalcycle

A non-motorized vehicle propelled by pedaling. It includes unicycles, bicycles, and tricycles.

Ramp

An auxiliary roadway used for entering or leaving thru-traffic lanes.

Recreational double

Pulling vehicle equipped with fifth wheel, pulling two trailers, used for recreation and personal travel, as opposed to commercial use.

Roadway

"Roadway" means that portion of a highway improved, designed, or ordinarily used for vehicular travel. In the event a highway includes 2 or more separate roadways, the term "roadway," as used herein, shall refer to any such roadway separately, but not to all such roadways collectively. §257.55

School bus

"School bus" means every motor vehicle, except station wagons, with a manufacturers' rated seating capacity of 16 or more passengers, including the driver, owned by a public, private, or governmental agency and operated for the transportation of children to or from school, or privately owned and operated for compensation for the transportation of children to or from school. School bus does not include buses operated by a municipally owned transportation system or by a common passenger carrier certificated by the state transportation department. §257.57

Semi-trailer

"Semi-trailer" means every vehicle with or without motive power, other than a pole-trailer, designed for carrying persons or property and for being drawn by a motor vehicle and so constructed that some part of its weight and that of its load rests upon or is carried by another vehicle. §257.59

Shoulder; ditch slope

"Shoulder" means that portion of the highway contiguous to the roadway generally extending the contour of the roadway, not designed for vehicular travel but maintained for the temporary accommodation of disabled or stopped vehicles otherwise permitted on the roadway.

"Ditch slope" is that portion of the highway adjacent to the shoulder if one exists or adjacent to the roadway on roads without shoulders, extending to the bottom of the roadside ditch and is not constructed or maintained for the use of any vehicles except those engaged in construction or maintenance. §257.59a

Snowmobile

"Snowmobile" means any motor driven vehicle designed for travel primarily on snow or ice of a type which utilizes sled runners or skis, or an endless belt tread or any combination of these or other similar means of contact with the surface upon which it is operated; but is not a vehicle which must be registered under Act No. 300 of the Public Acts of 1949, as amended, being sections 257.1 to 257.923 of the Michigan Compiled Laws. §257.1501

Special mobile equipment

"Special mobile equipment" means every vehicle not designed or used primarily for the transportation of persons or property and incidentally operated or moved over the highways, including farm tractors, road construction or maintenance machinery, mobile office trailers, mobile tool shed trailers, mobile trailer units used for housing stationary construction equipment, ditch-digging apparatus, well-boring and well-servicing apparatus. The foregoing enumeration shall be deemed partial and shall not operate to exclude other such vehicles which are within the general terms of this definition. §257.62

Street or highway

"Street or highway" means the entire width between boundary lines of every way publicly maintained when any part thereof is open to the use of the public for purposes of vehicular travel. §257.64

Thru highway

"Thru highway" means every state trunk line highway, or any other highway at the entrance to which vehicular traffic from an intersecting highway is required by law to stop before entering or crossing the same. §257.68

Towed vehicle

Vehicle being pulled or pushed by a tow truck or other motor vehicle, where some tires of the towed vehicle touch the road surface (does not include vehicles being transported on flat-bed truck).

Traffic

"Traffic" means pedestrians, ridden or herded animals, vehicles, street cars and other conveyances, either singly or together, while using any highway for purposes of travel. §257.69

Traffic Crash

An incident involving a motor vehicle, in transport, on a roadway, that resulted in death, injury or property damage of \$400 or more.

Traffic control devices

"Traffic control devices" means all signs, signals, markings, and devices not inconsistent with this act placed or erected by authority of a public body or official having jurisdiction, for the purpose of regulating, warning or guiding traffic. §257.70

Trailer

"Trailer" means every vehicle with or without motive power, other than a pole-trailer, designed for carrying property or persons and for being drawn by a motor vehicle and so constructed that no part of its weight rests upon the towing vehicle. §257.73

Transition area

Area of road where the number of travel lanes increases or decreases.

Truck

"Truck" means every motor vehicle designed, used, or maintained primarily for the transportation of property. §257.75

Truck Tractor

"Truck tractor" means every motor vehicle designed and used primarily for drawing other vehicles, and not so constructed as to carry a load other than a part of the weight of the vehicle and load so drawn, except that a truck tractor and semi-trailer engaged in the transportation of automobiles may transport motor vehicles on part of the power unit. §257.77

Unstabilized situation

Set of events not under human control. It starts when control is lost and ends when (1) control is regained or, (2) in the absence of persons who are able to regain control, when all persons and property are at rest.

Vehicle

"Vehicle" means every device in, upon, or by which any person or property is or may be transported or drawn upon a highway, excepting devices exclusively moved by human power or used exclusively upon stationary rails or tracks and excepting a mobile home. §257.79

Within-intersection crash

Traffic crash where the first harmful event occurs within the limits (corners) of the intersection. See At-intersection crash.

Sources: Motor Vehicle Code, ORV Act, Snowmobile Act, and National Safety Council Manual on Classification of Motor Vehicle Traffic Accidents.

FATALITY ANALYSIS REPORTING SYSTEM

The Fatality Analysis Reporting System (FARS) gathers data on the most severe traffic crashes that occur each year - those that result in loss of human life.

The system was conceived, designed, and developed by the National Center for Statistics and Analysis (NCSA) of the National Highway Traffic Safety Administration (NHTSA) to provide an overall measure of highway safety, to help identify traffic safety problems, to suggest solutions, and to help provide an objective basis on which to evaluate the effectiveness of motor vehicle safety standards and highway safety programs.

FARS became operational in 1975 and contains data on fatal traffic crashes within 50 States, the District of Columbia, and Puerto Rico. To be included in FARS, a crash must involve a motor vehicle traveling on a trafficway customarily open to the public, and must result in the death of a person (vehicle occupants or non-motorist).

The FARS file contains descriptions, in a standard format, of each fatal crash reported. Each crash has more than 100 different coded data elements that characterize the crash, the vehicles, and the people involved. The specific data elements may be modified slightly each year to conform to changing user needs, vehicle characteristics, and highway safety emphasis areas. The FARS analyst reviews the UD-10 to complete all data elements reported on four forms:

The Crash Form asks for specific information such as the time and location of the crash, the first harmful event, whether it is a hit-and-run crash, whether a school bus was involved, the number of vehicles and people involved and weather conditions.

The Vehicle Form calls for data on each vehicle involved in the crash. Specific data include the vehicle type, role in the crash, initial and principal impact points, the most harmful event.

The Driver Form calls for the driver's record and license status including mandated CDL information.

The Person Form calls for data on each person involved in the crash: his or her age and sex, role in the crash (driver, passenger, non-motorist), alcohol and drug involvement, injury severity and restraint use.

The data collected within FARS do not include any personal identifying information such as names, addresses, or social security numbers. Thus, any data kept in FARS files are made available to the public to fully conform to the Privacy Act laws. An overview of FARS data is published in various fact sheets and in an annual report - all available to the public. The annual report contains a comprehensive analysis of the years' data and includes some past years data with comparative analyses.

Michigan has participated in the FARS program since its inception. The FARS analyst gathers, translates and enters data via a local microcomputer directly into NHTSA's central computer data file. Data are automatically checked when entered for acceptable range values and for consistency.

FARS data are used extensively within NHTSA; and requests are received from sources such as State and local governments, research organizations, private citizens, the auto and insurance industries, Congress, and the media. Specific FARS data uses include the evaluation of:

- legal drinking age legislation
- motorcycle helmet usage legislation
- repeat offender
- restraint usage laws
- the 65 MPH speed limit
- safety design of cars and light trucks
- safety of large trucks on the highway

FARS data can be accessed at the State level by the FARS analyst to respond to State safety issues. Users may request specific data from the Center at no charge for most requests, generally within two weeks allowing more time for complex or lengthy reports. Also users can obtain a file on computer tape in one of several formats amenable to analysis. This will enable you to process the data using your own computer system. FARS website address is: www-fars.nhtsa.dot.gov.

To request FARS information, contact:

FARS Analyst
Michigan State Police
Central Records Division
7150 Harris Drive
Lansing, MI 48913
Phone (517) 322-6910 or (517) 322-5030

Please photocopy and distribute as needed

1999 EDITION

UD-10 INSTRUCTION MANUAL INDEX

For Truck/Bus data fields, see "Truck/Bus Index" page 83

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